


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 09, 2006 8:00 am
Secretary of State

03-09-2006 90165 016 ****61.25

DOCUMENT # 748241 1. Entity Name FORESTBROOK III ASSOCIATION, INC.	
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Principal Place of Business % WANEK PROP. MGMT. 2155 NE COACHMAN RD. CLEARWATER FL 3 US	Mailing Address % WANEK PROP. MGMT. 2155 NE COACHMAN RD. CLEARWATER FL 33765-2616 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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1st MOORE CR2E037 (10/05)

City & State	City & State	4. FEI Number 59-2005015	Applied For Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WANEK PROPERTY MANAGEMENT 2155 N.E. COACHMAN RD. CLEARWATER FL 33765	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE VP Delete <input checked="" type="checkbox"/>	NAME LEE, THOMAS STREET ADDRESS 700 STARKLEY RD #1221 CITY-ST-ZIP LARGO FL
TITLE SD Delete <input type="checkbox"/>	NAME VENEZIANO, CAROL STREET ADDRESS 700 STARKEY RD #1313 CITY-ST-ZIP LARGO FL
TITLE PD Delete <input type="checkbox"/>	NAME GEAUEHAN, FRANCIS STREET ADDRESS 700 STARKLEY RD #1324 CITY-ST-ZIP LARGO FL
TITLE Delete <input type="checkbox"/>	NAME STREET ADDRESS CITY-ST-ZIP
TITLE Delete <input type="checkbox"/>	NAME STREET ADDRESS CITY-ST-ZIP
TITLE Delete <input type="checkbox"/>	NAME STREET ADDRESS CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE TD Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>	NAME LARUS, ROBERT STREET ADDRESS 700 STARKLEY RD. #1312 CITY-ST-ZIP LARGO FL
TITLE Change <input type="checkbox"/> Addition <input type="checkbox"/>	NAME STREET ADDRESS CITY-ST-ZIP
TITLE Change <input type="checkbox"/> Addition <input type="checkbox"/>	NAME STREET ADDRESS CITY-ST-ZIP
TITLE Change <input type="checkbox"/> Addition <input type="checkbox"/>	NAME STREET ADDRESS CITY-ST-ZIP
TITLE Change <input type="checkbox"/> Addition <input type="checkbox"/>	NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  FRANCIS J. GEAUS ²⁻¹⁶⁻⁰⁶ 727-518-9849