## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 749496**

FILED Apr 28, 2004 Secretary of State

Entity Name: FORREST AVENUE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:  P.O. BOX 1375  COCOA, FL 32922  Current Mailing Address:		New Principal Pla	New Principal Place of Business:  P.O. BOX 561014 ORLANDO, FL 32856  New Mailing Address:  P.O. BOX 561014 ORLANDO, FL 32856	
		New Mailing Addı		
P.O. BOX 1375 COCOA, FL 32922				
El Number	r: 59-2197683	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Addres	Name and Address of New Registered Agent:	
JUAREZ,				
ORLAND	THBURG DRIVE O, FL 32812	US	ourpose of changing its registe	ered office or registered agent, or both
DRLAND	THBURG DRIVE D, FL 32812 e named entity see of Florida.	US	ourpose of changing its registe	ered office or registered agent, or both
ORLANDO	HBURG DRIVE D, FL 32812 e named entity se of Florida. RE:	US submits this statement for the p		
ORLANDO The above n the Stat SIGNATU	HBURG DRIVE D, FL 32812 e named entity se of Florida. RE:	US submits this statement for the particle of Registered Agric Signature	ent	ered office or registered agent, or both  Date  NGES TO OFFICERS AND DIRECTO
ORLANDO The above n the Stat SIGNATU	HBURG DRIVED, FL 32812  e named entity see of Florida.  RE: Electron	US submits this statement for the particle of Registered Agrocks:  Delete RICIA	ent	Date
ORLANDO The above In the State SIGNATU  OFFICER Value: Val	HBURG DRIVED, FL 32812  e named entity see of Florida.  RE:  Electron  S AND DIRECTOR ()  ROMANO, PATION SEE FLORIDA BIOMERRITT ISLAI	ic Signature of Registered Ag  TORS:  Delete RICIA ND, FL 32953  Delete RT DAVE #8	ent  ADDITIONS/CHAN  Title: Name: Address:	Date NGES TO OFFICERS AND DIRECTO

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA ROMANO PD 04/28/2004