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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

750793

(2)

THE FOREST HEIGHTS-HOLLY HILLS AREA NEIGHBORHOOD

	IATION INC.						R1816 86881 1886
Principal Place	of Business	Mailing Address				HA Baril Baril Baril	RIEN CIAN TOAN
B14 SHARON RO	DAD	1814 SHARON ROAD					
allahassee fl		TALLAHASSEE FL 32303-4	426		Į		
\$		US			3. Date Incorporated or Qualified 01/25/1980	3a. Date of Las 04/26/1	
Principal Place of Business		2a, Mailing Address	2e, Mailing Address 26		4. FEI Number 59-2308616		Applied For Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.7	Additional Required
City & State		City & State			6. Election Campaign Financing		O May Be
3		28			Trust Fund Contribution		d to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for i		r s. 199.032,
4	25	29]	[30]			Yes Who	
***************************************	g. Name and Address of Curr	ent negistered Agent		81 Name	10. Name and Address of New Re	Sistered Wallt	
MULLER, NANCY A. 1814 SHARON ROAD TALLAHASSEE FL 32303			82		Address (P.O. Box Number is Not Acceptable)		
			}	83			
IALLAINA	SSEE FL SESUS						
			ļ	84 City		FL 85 Z	p Code
office or re	egistered agent, or both, in the Sta	ate of Florida. Such change was ligations of Section 617.0503, F	authorized	by the corpor	prporation submits this statement for the p ration's board of directors. I hereby accep	of the appointment	as registered
agent. I an	n tamiliar with, and accept the ob-	ingentions of Section of 17.0003, i		LICO.			
agent. I an SIGNATURE	of familiar with, and accept the ob-				quired when reinstating)	DATE	
agent. I an SIGNATURE	Signature, typed or printed name of registered OFFICERS A	agent and tills if applicable. (NC	TE Regislered	Agent signature rec	guired when reinstating) ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECT	
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SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

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Secretary of State

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