

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90024 043 ****61.25

DOCUMENT # 750999			
1. Entity Name FOREST LAKES GOLF & TENNIS CLUB, BUILDING NO. 1, INC.			
Principal Place of Business 4949 TAMiami TLR N 201 NAPLES FL 34103-3017 US		Mailing Address 4949 TAMiami TLR N 201 800 HARBOUR DRIVE NAPLES FL 34103-3017 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 4949 Tamiami Trail N	
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite 201	
City & State		City & State Naples, FL	
Zip	Country	Zip	Country
		34103	USA
4. FEI Number 59-2069182			
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent MOORE, WILLIAM S C/O MELDON CONSULTANTS 4949 TAMiami TLR N 201 NAPLES FL 34103-3017		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	
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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			



1st MOORE CR2E037 (10/07)

FILE NOW: FEE IS \$61.25 Due By: May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ROSSLER, DAVID 501 FOREST LAKE BLVD#207 NAPLES FL 34101 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Peterson, John 501 Forest Lakes Blvd. #312 Naples, FL 34105 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SEABURY, WILLIAM 501 FOREST LAKES BLVD NAPLES FL 34101 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SEABURY, WILLIAM 501 Forest Lakes Blvd #205 Naples, FL 34105 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV LUCY, EILEEN 501 FOREST LAKES BLVD 309 NAPLES FL 34105 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KRYNOK, JOHN 501 FOREST LAKE BLVD #108 NAPLES FL 34106 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KRYNOK, JOHN 501 Forest Lakes Blvd #210 Naples, FL 34105 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUCY, CORNELIUS 501 FOREST LAKES BLVD 309 NAPLES FL 34105 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV LUCY, CORNELIUS 501 Forest Lakes Blvd #309 Naples, FL 34105 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Paz, Jacqueline 20 Stony Hill Rd. Clifton, NJ 07013 ☐ Change ☒ Addition

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: William Seabury **4-2-08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #