

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750999

FILED
Apr 25, 2011
Secretary of State

Entity Name: FOREST LAKES GOLF & TENNIS CLUB, BUILDING NO. 1, INC.

Current Principal Place of Business:

4949 TAMIAMI TRAIL N.
SUITE 201
NAPLES, FL 341033017 US

New Principal Place of Business:

Current Mailing Address:

4949 TAMIAMI TRAIL N.
STE. 201
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 59-2069182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, WILLIAM S
C/O MELDON CONSULTANTS
4949 TAMIAMI TRL N 201
NAPLES, FL 341033017 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: JOY, LELONEK
Address: 501 FOREST LAKES BLVD. #307
City-St-Zip: NAPLES, FL 34105

Title: D
Name: CAMILLE, VISCONTI
Address: 501 FOREST LAKES BLVD. #303
City-St-Zip: NAPLES, FL 34105

Title: DVP
Name: KRYNOK, JOHN
Address: 501 FOREST LAKES BLVD. #210
City-St-Zip: NAPLES, FL 34105

Title: DP
Name: LUCEY, EILEEN
Address: 501 FOREST LAKES BLVD. #309
City-St-Zip: NAPLES, FL 34105

Title: DST
Name: PAZ, JACQUELINE
Address: 20 STONY HILL RD
City-St-Zip: CLIFTON, NJ 07013

I hereby 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 all other like empowered.

SIGNATURE: EILEEN LUCEY

DP

04/25/2011

Electronic Signature of Signing Officer or Director

Date