


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2005 8:00 am
Secretary of State

03-08-2005 90165 018 ****61.25

DOCUMENT # 753353		
1. Entity Name FORESTBROOK IV ASSOCIATION, INC.		

Principal Place of Business C/O WANER PROPERTY MANAGEMENT 2155 N.E. COACHMAN ROAD CLEARWATER FL 33765	Mailing Address C/O WANER PROPERTY MANAGEMENT 2155 N.E. COACHMAN ROAD CLEARWATER FL 33765
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/04)

4. FEI Number 59-2071290		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent WANER PROPERTY MANAGEMENT 2155 NE COACHMAN ROAD 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 reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 PD	<input checked="" type="checkbox"/> Delete	TITLE VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME GOODWIN, JACK		NAME KINGSBURY, VICKY	
STREET ADDRESS 700 STARKEY RD. #1012		STREET ADDRESS 700 STARKEY RD. #	
CITY-ST-ZIP LARGO FL		CITY-ST-ZIP LARGO FL	
TITLE VPD	<input checked="" type="checkbox"/> Delete	TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME BRUTUS, JOAN		NAME WALKER, JOSEPH	
STREET ADDRESS 700 STARKEY ROAD #1112		STREET ADDRESS 700 STARKEY RD. #	
CITY-ST-ZIP LARGO FL		CITY-ST-ZIP LARGO FL	
TITLE TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BOYD, PAT		NAME	
STREET ADDRESS 700 STARKEY RD. #1125		STREET ADDRESS	
CITY-ST-ZIP LARGO FL		CITY-ST-ZIP	
TITLE SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BYRNE, PATRICK		NAME	
STREET ADDRESS 700 STANKEY RD #1011		STREET ADDRESS	
CITY-ST-ZIP LARGO FL 33771		CITY-ST-ZIP	
TITLE SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BERARDI, DOMENIC		NAME	
STREET ADDRESS 700 STARKLEY RD #1142		STREET ADDRESS	
CITY-ST-ZIP LARGO FL		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *X Vicky Kingsbury Vicky Kingsbury 2/17/05 725-584-0210*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #