

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754438

FILED
Jan 29, 2009
Secretary of State

Entity Name: FORREST PARK CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

5503 WESTBURY DRIVE
ORLANDO, FL 32808 US

New Principal Place of Business:

Current Mailing Address:

5503 WESTBURY DRIVE
ORLANDO, FL 32808 US

New Mailing Address:

FEI Number: 59-2358831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KROPOWENSKY, MICHAEL
5503 WESTBURY DRIVE
ORLANDO, FL 32808 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: TD () Delete
Name: BRANDY, COLE
Address: 5620 HOLLOWBAK RD
City-St-Zip: ORLANDO, FL 32808

Title: PD () Delete
Name: KROPOWENSKY, MIKE
Address: 5503 WESTBURY DR.
City-St-Zip: ORLANDO, FL 32808

Title: SD () Delete
Name: NORTON, WYNETTA
Address: 5513 WESTFIELDS ST.
City-St-Zip: ORLANDO, FL 32808

Title: VD () Delete
Name: BLAIR, LAUREN
Address: 5621 CASTLE OAK CT.
City-St-Zip: ORLANDO, FL 32808

Title: CD () Delete
Name: BLUE, NANCY
Address: 3127 N. CASTLE OAK AVE.
City-St-Zip: ORLANDO, FL 32808

Title: VD () Delete
Name: WALDROP, SHARON
Address: 2942 N CASTLE OAK DR
City-St-Zip: ORLANDO, FL 32808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: BLAIR, LAUREN
Address: 5621 CASTLE OAK COURT
City-St-Zip: ORLANDO, FL 32808

Title: PD (X) Change () Addition
Name: KROPOWENSKY, MICHAEL
Address: 5503 WESTBURY DR.
City-St-Zip: ORLANDO, FL 32808

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MICHAEL KROPOWENSKY

PD

01/29/2009

Electronic Signature of Signing Officer or Director

Date