

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754584

FILED  
Mar 15, 2010  
Secretary of State

**Entity Name:** FOREST LAKE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 32779

**New Mailing Address:**

**FEI Number:** 59-2307872      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HART, JAMES W JR  
SENTRY MANAGEMENT INC  
2180 WEST SR 434 SUITE 5000  
LONGWOOD, FL 32779 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: PD  
Name: WASSON, STEVEN  
Address: 7715 FOREST TRL #8  
City-St-Zip: PORT RICHEY, FL 34668 US

Title: VPD  
Name: MURRIN, CONNIE  
Address: 8636 SHADBLOW CT #4  
City-St-Zip: PORT RICHEY, FL 34668 US

Title: SD  
Name: HENDERSON, CAROLE  
Address: 7741 FOREST TRAIL #1  
City-St-Zip: PORT RICHEY, FL 34668 US

Title: TD  
Name: MASON, NANCY  
Address: 7725 FOREST TRAIL #8  
City-St-Zip: PORT RICHEY, FL 34668 US

Title: D  
Name: CARABELLO, BARBARA  
Address: 7715 FOREST TRL #3  
City-St-Zip: PORT RICHEY, FL 34668 US

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: STEVEN WASSON

PD

03/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date