

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 755481

**FILED**  
**Feb 01, 2010**  
**Secretary of State**

**Entity Name:** FOREST HILLS PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8301 FOREST HILLS RD.  
MELROSE, FL 32666

**New Principal Place of Business:**

**Current Mailing Address:**

8301 FOREST HILLS RD.  
MELROSE, FL 32666

**New Mailing Address:**

**FEI Number:** 59-2842368

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUNN, KOIN  
8301 FOREST HILLS RD  
MELROSE, FL 32666 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: DP  
Name: ELLIOTT, TIMOTHY  
Address: 8080 FOREST HILLS ROAD  
City-St-Zip: MELROSE, FL 32666

Title: DV  
Name: PERKINS, BARBRA  
Address: 8301 FOREST HILLS ROAD  
City-St-Zip: MELROSE, FL 32666

Title: DT  
Name: GUNN, KOIN D  
Address: 5710 LONE PINE TRL  
City-St-Zip: MELROSE, FL 32666

Title: SEC  
Name: WRIGHT, WREN  
Address: 108 FOREST HILLS RD  
City-St-Zip: MELROSE, FL 32666

Title: DO  
Name: NORMAN, DEAN  
Address: P.O. BOX 505  
City-St-Zip: LAKE GENEVA, FL 32160

Title: DO  
Name: HATHAWAY, EMMONS  
Address: 5809 TIFFANY LANE  
City-St-Zip: MELROSE, FL 32666

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:** KOIN D. GUNN

RA

02/01/2010

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

\_\_\_\_\_  
Date