# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 24, 2007**
**Secretary of State**

DOCUMENT# 756222

**Entity Name:** FOREST VIEW TOWNHOMES OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

205 KATHY COURT
MARY ESTHER, FL 32569 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 308
MARY ESTHER, FL 32569 US

**New Mailing Address:**

**FEI Number: 59-2855874** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**

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

BECKER & POLIAKOFF, P.A.
348 MIRACLE STRIP PARKWAY, SUITE 7
FORT WALTON BEACH, FL 32548 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 ( ) Delete
Name: BRAGD, BARBARA
Address: 204 KATHY COURT
City-St-Zip: MARY ESTHER, FL 32569

Title: D ( ) Delete
Name: GILBSON, VAUGHN
Address: 310 W VAN MATRE ST BUILDING 210
City-St-Zip: EGLIN AFB, FL 32542

Title: TD ( ) Delete
Name: EDWARDS, BETTY A
Address: 205 KATHY COURT
City-St-Zip: MARY ESTHER, FL 32569

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition
Name: BREEDEN, TOMMIE
Address: 204 KATHY COURT
City-St-Zip: MARY ESTHER, FL 32569

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: BETTY A EDWARDS TD 05/24/2007

Electronic Signature of Signing Officer or Director — Date