## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00700

City-St-Zip:

TAMPA, FL 33612

FILED Apr 08, 2009 Secretary of State

Entity Name: FOREST HILLS VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 7001 TEMPLE TERRACE HWY TEMPLE TERRACE, FL 33637 **Current Mailing Address: New Mailing Address:** 7001 TEMPLE TERRACE HWY TEMPLE TERRACE, FL 33637 US FEI Number: 59-2458935 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **DUARTE ANTONIA III** DUARTE ANTONIO III 6221 LAND O'LAKES BLVD 6221 LAND O'LAKES BLVD US LAND O LAKES, FL 34639 LAND O LAKES, FL 34639 US 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: ANTONIO DUARTE III 04/08/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **DVPS** () Delete () Change () Addition LUCIEN, REGINALD Name: Name: 9487 FOREST HILLS CIR. Address: Address: City-St-Zip: TAMPA, FL 33612 City-St-Zip: Title: () Delete Title: () Change () Addition BRANSFORD, JIM Name: Name: Address: 810 BEN LOMOND DR. Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: Title: DPT () Delete Title: (X) Change ( ) Addition MCADOO, RYAN M MCADOO, RYAN M Name: Name: Address: 9453 FOREST HILLS PL. Address: 9453 FOREST HILLS PL. City-St-Zip: TAMPA, FL 33612 City-St-Zip: TAMPA, FL 33612 Title: ( ) Delete Title: (X) Change ( ) Addition Name: GEORGE, SUGAR Name: GEORGE, SHUGAR 4432 FOREST HILLS CIR Address: Address: 9432 FOREST HILLS CIR City-St-Zip: TAMPA, FL 33612 City-St-Zip: TAMPA, FL 33612 Title: () Delete Title: (X) Change ( ) Addition COOKE, DAVID HOLLAND, TISHA Name: Name: 9429 FOREST HILLS CIR 9433 FOREST HILLS CIR Address: Address:

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.

City-St-Zip:

TAMPA, FL 33612

SIGNATURE: RYAN MCADOO DP 04/08/2009