

FILE NOW: FILING FEE IS \$61.25

FILED
May 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N00892 (2)
1. Corporation Name
FOREST CREEK VILLAS CONDOMINIUM ASSOCIATION, INC



Principal Place of Business Mailing Address
10968 LEITNER CREEK DR UNIT 148 BONITA SPRINGS FL 33923
10968 LEITNER CREEK DR UNIT 148 BONITA SPRINGS FL 33923

3. Date Incorporated or Qualified
01/13/1984
4. FEI Number 59-2397321 Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
PEDERSEN, DOROTHY
10841 LEITNER CREEK DR #138
BONITA SPRINGS FL 34135

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	MORRIS, PAUL	1.2 NAME	PEDERSEN, DOROTHY
STREET ADDRESS	8815 W 104TH ST.	1.3 STREET ADDRESS	10841 LEITNER CREEK DR. #136
CITY-ST-ZIP	OVERLAND KS	1.4 CITY-ST-ZIP	BONITA SPRINGS FL 34135
TITLE	VD	2.1 TITLE	PD
NAME	HIMES, BERTRAM	2.2 NAME	DESMARAIS, GEORGE
STREET ADDRESS	10881 LEITNER CREEK DR. #117	2.3 STREET ADDRESS	10883 LEITNER CREEK DRIVE #130
CITY-ST-ZIP	BONITA SPRINGS FL	2.4 CITY-ST-ZIP	BONITA SPRINGS, FL 34135
TITLE	PD	3.1 TITLE	
NAME	COATES, SARAH	3.2 NAME	
STREET ADDRESS	10830 LEITNER CREEK DR. #140	3.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL	3.4 CITY-ST-ZIP	
TITLE	TD	4.1 TITLE	
NAME	BURKE, DONALD	4.2 NAME	
STREET ADDRESS	10855 LEITNER CREEK DR. #135	4.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL	4.4 CITY-ST-ZIP	
TITLE	PD	5.1 TITLE	
NAME	WYSZECKI, FRITZ V	5.2 NAME	
STREET ADDRESS	10953 LEITNER CREEK DRIVE, #121	5.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	MORRIS, PAUL	1.2 NAME	PEDERSEN, DOROTHY
STREET ADDRESS	8815 W 104TH ST.	1.3 STREET ADDRESS	10841 LEITNER CREEK DR. #136
CITY-ST-ZIP	OVERLAND KS	1.4 CITY-ST-ZIP	BONITA SPRINGS FL 34135
TITLE	VD	2.1 TITLE	PD
NAME	HIMES, BERTRAM	2.2 NAME	DESMARAIS, GEORGE
STREET ADDRESS	10881 LEITNER CREEK DR. #117	2.3 STREET ADDRESS	10883 LEITNER CREEK DRIVE #130
CITY-ST-ZIP	BONITA SPRINGS FL	2.4 CITY-ST-ZIP	BONITA SPRINGS, FL 34135
TITLE	PD	3.1 TITLE	
NAME	COATES, SARAH	3.2 NAME	
STREET ADDRESS	10830 LEITNER CREEK DR. #140	3.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL	3.4 CITY-ST-ZIP	
TITLE	TD	4.1 TITLE	
NAME	BURKE, DONALD	4.2 NAME	
STREET ADDRESS	10855 LEITNER CREEK DR. #135	4.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL	4.4 CITY-ST-ZIP	
TITLE	PD	5.1 TITLE	
NAME	WYSZECKI, FRITZ V	5.2 NAME	
STREET ADDRESS	10953 LEITNER CREEK DRIVE, #121	5.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Handwritten Signature]*

CR2E037 (10/97)