


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # N02000006456 1. Entity Name FORCE FOUR COMMERCE HOMEOWNERS ASSOCIATION, INC.	
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Principal Place of Business 5511 HANSEL AVE ORLANDO, FL 32809	Mailing Address 5511 HANSEL AVE ORLANDO, FL 32809
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DO NOT WRITE IN THIS SPACE



04242007 No Chg-NP CR2E037 (4/06)

4. FEI Number 04-3722853	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BEAULIEU, AMY D 5511 HANSEL AVE ORLANDO, FL 32809
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
(Signature, typed or printed name of registered agent and title if applicable)

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ECKHART, RAYMOND 4210 WOODLYNNE LN ORLANDO, FL 32812
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MORENO, CARLOS 552 FORCE FOUR PKWY ORLANDO, FL 32839
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST BEAULIEU, AMY D 5511 HANSEL AVE ORLANDO, FL 32809
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U00000738859
05/14/07-80001-020 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	4/24/07	407-851-1519
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>