

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2005 8:00 am
Secretary of State

03-22-2005 90011 032 ****61.25

DOCUMENT # N02000008427

1. Entity Name
FORSYTHE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
% P.O. BOX 15394
TALLAHASSEE, FL 32317-5394

Mailing Address
% P.O. BOX 15394
TALLAHASSEE, FL 32317-5394

50030019



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03192005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
06-1654133

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JARA, MARIELA
4085 FORSYTHE PARK CIRCLE
TALLAHASSEE, FL 32309

7. Name and Address of New Registered Agent

Name
Stephanie A. Daniel
Street Address (P.O. Box Number is Not Acceptable)

4506 Barclay Lane
City
Tallahassee FL 32309

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 **Stephanie A. Daniel, President**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/19/2005

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME BARDIN, KEVIN
STREET ADDRESS 4096 FORSYTHE PARK CIRCLE
CITY-ST-ZIP TALLAHASSEE, FL 32309

TITLE VD ☐ Delete
NAME JARA, MARIELA
STREET ADDRESS 4085 FORSYTHE PARK CIRCLE
CITY-ST-ZIP TALLAHASSEE, FL 32309

TITLE SD ☐ Delete
NAME DANIELS, ELLA MAE
STREET ADDRESS 3974 FORSYTHE PARK COURT
CITY-ST-ZIP TALLAHASSEE, FL 32309

TITLE TD ☐ Delete
NAME THOMPSON, CINDY
STREET ADDRESS 4084 FORSYTHE PARK CIRCLE
CITY-ST-ZIP TALLAHASSEE, FL 32309

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P/D ☒ Change ☐ Addition
NAME Stephanie A. Daniel
STREET ADDRESS 4506 Barclay Lane, Tallahassee, FL 32309

TITLE V/D ☒ Change ☐ Addition
NAME Yvette M. Pavone
STREET ADDRESS 4036 Forsythe Park Cir., Tallahassee, FL 32309

TITLE S/D ☒ Change ☐ Addition
NAME Paulette M. Nadia Scheffers
STREET ADDRESS 3956 Forsythe Park Court, Tallahassee, FL 32309

TITLE T/D ☒ Change ☐ Addition
NAME Marten K. Scheffers
STREET ADDRESS 3956 Forsythe Park Court, Tallahassee, FL 32309

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

Stephanie A. Daniel
President

3/19/05

Date

414-3666

Daytime Phone #