

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02220

FILED
Apr 15, 2010
Secretary of State

Entity Name: FOREST MERE TOWNHOUSE COMMUNITY ASSOCIATION, INC

Current Principal Place of Business:

26560 SOUTHERN PINES DR
J-106
BONITA SPRINGS, FL 34135

Current Mailing Address:

P.O. BOX 367274
BONITA SPRINGS, FL 34136

New Principal Place of Business:

26560 SOUTHERN PINES DR
J-106
BONITA SPRINGS, FL 34135 US

New Mailing Address:

P.O. BOX 367274
BONITA SPRINGS, FL 34136 US

FEI Number: 65-0048425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, HENRIETA P
26560 SOUTHERN PINES DR.
#J-106
BONITA SPRINGS, FL 34135 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: PT
Name: MOORE, HENRIETTA
Address: 26560 SOUTHERN PINES DR - J-106
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: VP
Name: HOLZBERG, ELFIE
Address: 26510 SOUTHERN PINES DR - L-101
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: S
Name: STRAHAN, SARAH
Address: 26585 ROBIN WAY - A-103
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: D
Name: NAUFFE, DAWN
Address: 26636 SOUTHERN PINES DR - G-1
City-St-Zip: BONITA SPRINGS, FL 34135 US

I hereby 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 all other like empowered.

SIGNATURE: HENRIETTA MOORE

P

04/15/2010

Electronic Signature of Signing Officer or Director

Date