

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02221

FILED
Mar 31, 2011
Secretary of State

Entity Name: FOREST MERE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11595 FORESTMERE DR
#108
BONITA SPRINGS, FL 34136

New Principal Place of Business:

11641 RED HIBISCUS DR
BONITA SPRINGS, FL 34135

Current Mailing Address:

PO BOX 367754
BONITA SPRINGS, FL 34135

New Mailing Address:

PO BOX 367754
BONITA SPRINGS, FL 34136

FEI Number: 65-0216567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMOUCÉ, MURRELL & GAL PA
5405 PARK CENTRAL COURT
NAPLES, FL 34109 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: P
Name: JENKINS, JANICE
Address: 11641 RED HIBISCUS DR
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP
Name: GOEKE, DARREN
Address: 11690 RED HIBISCUS DR
City-St-Zip: BONITA SPRINGS, FL 34135

Title: T
Name: SCHMIDT, JAMES
Address: 11631 FOREST MERE DR
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S
Name: STRAHAN, SARAH
Address: 26585 ROBIN WAY A-3
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: MOORE, LEONARD
Address: 26586 SOUTHERN PINES I-1
City-St-Zip: BONITA SPRINGS, FL 34135

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: JAMES SCHMIDT

T

03/31/2011

Electronic Signature of Signing Officer or Director

Date