

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002636

FILED
May 03, 2010
Secretary of State

Entity Name: FOREST PARK NEIGHBORHOOD I ASSOCIATION, INC.

Current Principal Place of Business:

%GULF BREEZE MGMT. SVCS., OF SW FL, LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

%GULF BREEZE MGMT. SVCS., OF SW FL, LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135

New Mailing Address:

FEI Number: 90-0154447 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WEIDNER, RALPH L CAM
%GULF BREEZE MGMT SVCS OF SW FL, LLC.
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135 US

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: PD
Name: FOX, SIOBHAN
Address: 3931 RECREATION LANE
City-St-Zip: NAPLES, FL 34116

Title: SD
Name: WOOD, SUSAN
Address: 3925 RECREATION LANE
City-St-Zip: NAPLES, FL 34116

Title: VTD
Name: SMURRA, DENISE
Address: 3923 RECREATION LANE
City-St-Zip: NAPLES, FL 34116

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: SIOBHAN FOX

PRES

05/03/2010

Electronic Signature of Signing Officer or Director

Date