2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2004
Secretary of State

DOCUMENT# N03000007486

Entity Name: FOREST LAKE ESTATES OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

34990 EMERALD COAST PARKWAY
SUITE 401
DESTIN, FL 32541

New Principal Place of Business:

4460 LEGENDARY DRIVE
SUITE 100
DESTIN, FL 32541

Current Mailing Address:

34990 EMERALD COAST PARKWAY
SUITE 401
DESTIN, FL 32541

New Mailing Address:

4460 LEGENDARY DRIVE
SUITE 100
DESTIN, FL 32541

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARK A. VIOLETTE, P.A.
34990 EMERALD COAST PARKWAY
SUITE 403
DESTIN, FL 32541 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: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Change (X) Addition
Name: MCCULLAR, LEE
Address: 4460 LEGENDARY DRIVE, SUITE 100
City-St-Zip: DESTIN, FL 32541

Title: D ( ) Change (X) Addition
Name: MCCULLAR, ANDREA
Address: 4460 LEGENDARY DRIVE, SUITE 100
City-St-Zip: DESTIN, FL 32541

Title: D ( ) Change (X) Addition
Name: RIGGS, STEPHEN C
Address: 4460 LEGENDARY DRIVE, SUITE 100
City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: LEE MCCULLAR D 04/13/2004

Electronic Signature of Signing Officer or Director — Date