## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000007428

FILED Apr 25, 2008 Secretary of State

Entity Name: THE FOREST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2033 WOOD STREET STE 118 SARASOTA, FL 34236

Current Mailing Address: New Mailing Address:

2033 WOOD STREET STE 118 SARASOTA, FL 34236

FEI Number: 20-3737962 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TURNER, JAMES L 200 S ORANGE AVE SARASOTA, FL 34236 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:

Clastera is Cinneting of Decistors of August

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: ( ) Change ( ) Addition Name: DABNEY, THOMAS G Name:

 Name:
 DABNEY, THOMAS G
 Name:

 Address:
 2033 WOOD STREET STE 118
 Address:

 City-St-Zip:
 SARASOTA, FL 34236
 City-St-Zip:

Title: DVT ( ) Delete Title: DV (X) Change ( ) Addition

Name:TURNER, RICHARD E JRName:CONDRON, JOHN JRAddress:7044 HAWKS HARBOR CIRCLEAddress:10673 LEAFWING DR.City-St-Zip:BRADENTON, FL 34207City-St-Zip:SARASOTA, FL 34241

Title: DS ( ) Delete Title: DST (X) Change ( ) Addition

 Name:
 TURNER, JAMES L
 Name:
 TURNER, JAMES L

 Address:
 2000 S ORANGE AVE
 Address:
 2000 S ORANGE AVE

 City-St-Zip:
 SARASOTA, FL 34236
 City-St-Zip:
 SARASOTA, FL 34236

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JAMES L TURNER DST 04/25/2008