2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N05131

1. Entity Name

Principal Place of Business

FOREST LAKE PROFESSIONAL CENTRE CONDOMINIUM OWNERS' ASSOCIATION, INC.

Mailing Address

FILED Feb 27, 2007 8:00 am Secretary of State

02-27-2007 90007 019 ****61.25

SUITE ONE	T LAKE BLY BEACH FL :		SUITE	200 FOREST LAKE BLVD. SUITE ONE DAYTONA BEACH FL 32119								
2. Principal F	Place of Busin	ness - No P.O. Box #	3. Maili	3. Mailing Address					iii Baiai a iibi ii aa a kii	ol iidi didii bibu	8 [43] BIBII BIBII #	(E))) B1 [] B1
Suite, Apt. #, etc.			Suí	Suite, Apt. #, etc.				- 1st MOORE CR2E037 (10/06)				
City & State			City	City & State				4. FEI Number Applied For 59-2704333 Not Applied				
Zip	p Country		Zip	Zip		Country		5. Certificate of Status Desired See Required				
	6. Name	and Address of Curre	nt Registere	egistered Agent		<u> </u>		7. Name and Ad	dress of New F	Registered		
						Name Rhonda R. Strickhauser.						
ON 200	DIK, CECI) FOREST	ILY LAKE BLVD				Street Address (P.O. Box Number is Not Acceptable)						
		CH. FL 32119				_		,				
						City				FL	Zip Coc	le
	e named entity tions of regist	y submits this statement	t for the purpo	ose of changing its r	egister	ed office or	registered	dagent, or both, in	n the State of Flo	orida. I am	familiar with	and accept
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FILE NOW: FEE IS \$61.25 Due By May 1, 2007				Election Campaign Fi Trust Fund Contribution				\$5.00 May Be Added to Fees Make Check Payable to Florida Department of Star				
	Due By	May 1, 2007		Trust Fund Co	ontributi	ion. I	∐ Å	dded to Fees	Flori	da Depar	tment of \$	State
10.	Due By	OFFICERS AND I	DIRECTORS	Trust Fund Co	ontributi	ion. l		dded to Fees				
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver on trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with an other proposers.

SIGNATURE:

2-20-07 386-756-1000
Dayline Phone *