

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002382

FILED
Jan 11, 2007
Secretary of State

Entity Name: FOREST APARTMENTS OF JACKSONVILLE, INC.

Current Principal Place of Business:

4401 EMERSON ST - STE 1
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

4401 EMERSON ST - STE 1
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 20-5319124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CURLEY, CHARLES R JR
1301 RIVERPLACE BLVD
STE 1500
JACKSONVILLE, FL 32207 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: D () Delete
Name: WHITMER, JOHN
Address: 4401 EMERSON ST - STE 1
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: GULLIFORD, WILLIAM I III
Address: 4401 EMERSON ST - STE 1
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: WULBURN, ALLAN
Address: 4401 EMERSON ST - STE 1
City-St-Zip: JACKSONVILLE, FL 32207

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WHITNER, JOHN
Address: 4401 EMERSON ST - STE 1
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP (X) Change () Addition
Name: MAXWELL, PAM
Address: 4401 EMERSON ST - STE 1
City-St-Zip: JACKSONVILLE, FL 32207

Title: TREA (X) Change () Addition
Name: LEWIS, W J
Address: 4401 EMERSON ST - STE 1
City-St-Zip: JACKSONVILLE, FL 32207

Title: SECY () Change (X) Addition
Name: BROWN, JOYCE
Address: 4401 EMERSON ST - STE 1
City-St-Zip: JACKSONVILLE, FL 32207

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROLYN W. ETTLINGER

E.D.

01/11/2007

Electronic Signature of Signing Officer or Director

Date