

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003311

FILED
Apr 08, 2009
Secretary of State

Entity Name: FORESTWOOD PLACE HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434, STE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434, STE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 26-2219083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
% SENTRY MANG., INC.
2180 WEST SR 434 STE 5000
LONGWOOD, FL 327795044 US

Name and Address of New Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 STE 5000
LONGWOOD, FL 327795044 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: JAMES W HART JR

04/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GODWIN, ROBERT
Address: 4776 NEW BROAD STREET #250
City-St-Zip: ORLANDO, FL 32814

Title: DVP () Delete
Name: HENDERSON, ED JR
Address: 1004 VERSAILLES CT.
City-St-Zip: MAITLAND, FL 32751

Title: D/S () Delete
Name: MELOON, MELISSA
Address: 4776 NEW BROAD STREET, #250
City-St-Zip: ORLANDO, FL 32814

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KARPAY, BARRY I
Address: 5100 W LEMON ST STE 312
City-St-Zip: TAMPA, FL 33609

Title: VPD (X) Change () Addition
Name: HENDERSON, ED
Address: 1004 VERSAILLES CT
City-St-Zip: MAITLAND, FL 32751

Title: TSD (X) Change () Addition
Name: HUDRLIK, DEBORA L
Address: 5100 W LEMON ST STE 312
City-St-Zip: TAMPA, FL 33609

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: BARRY I KARPAY

PD

04/08/2009

Electronic Signature of Signing Officer or Director

Date