

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003626

FILED  
Apr 28, 2008  
Secretary of State

**Entity Name:** FIXEL FOREST HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

9310 OLD KINGS ROAD SOUTH #1101  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 56020  
JACKSONVILLE, FL 32241

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

FIXEL, ALAN L  
9310 OLD KINGS ROAD SOUTH #1101  
JACKSONVILLE, FL 32257 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: FIXEL, ALAN L  
Address: POST OFFICE BOX 56020  
City-St-Zip: JACKSONVILLE, FL 32241

Title: D (X) Delete  
Name: FIXEL, REBECCA  
Address: POST OFFICE BOX 56020  
City-St-Zip: JACKSONVILLE, FL 32241

Title: D (X) Delete  
Name: PORTNOY, JAY  
Address: 9283 SAN JOSE BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32257

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALAN FIXEL

D

04/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date