

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006131

FILED
Apr 30, 2010
Secretary of State

Entity Name: THE HOMEOWNERS ASSOCIATION OF FOREST COUNTRY 6TH ADDITION, INC.

Current Principal Place of Business:

5159 SOUTHWEST STATE ROAD 247
LAKE CITY, FL 32024

New Principal Place of Business:

Current Mailing Address:

5159 SOUTHWEST STATE ROAD 247
LAKE CITY, FL 32024

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:

STEVENS, ALEX H JR
5159 SOUTHWEST STATE ROAD 247
LAKE CITY, FL 32024 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
Name: STEVENS, ALEX H JR
Address: 5159 SOUTHWEST STATE ROAD 247
City-St-Zip: LAKE CITY, FL 32024

Title: D
Name: BIELLING, PATRICIA S
Address: 397 SOUTHWEST OYSTER SHELL GLEN
City-St-Zip: LAKE CITY, FL 32024

Title: D
Name: STEVENS, DON R
Address: 455 SOUTHWEST OYSTER SHELL GLEN
City-St-Zip: LAKE CITY, FL 32024

Title: D
Name: STEVENS, BRANTLEY T
Address: 243 SOUTHWEST OYSTER SHELL GLEN
City-St-Zip: LAKE CITY, FL 32024

Title: D
Name: BRINKLEY, LISA S
Address: 234 SOUTHWEST OYSTER SHELL GLEN
City-St-Zip: LAKE CITY, FL 32024

I hereby 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 all other like empowered.

SIGNATURE: LISA S. BRINKLEY

D

04/30/2010

Electronic Signature of Signing Officer or Director

Date