

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90166 001 ****61.25

DOCUMENT # N22032 1. Entity Name FORESTER WOODS AT CEDAR CREEK II HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 3452 SHADY BROOK LANE SARASOTA, FL 34243 US			Mailing Address C/O ALL FLORIDA SERVICES 2831 RINGLING BLVD., #218F SARASOTA, FL 34237		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
6. Name and Address of Current Registered Agent ALL FLORIDA SERVICES INC 2831 RINGLING BLVD #218F SARASOTA, FL 34237				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HAMMER, JOAN S 2831 RINGLING BLVD #218F SARASOTA, FL 34237	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SHELLHAMMER, JOAN 2831 RINGLING BLVD #218F SARASOTA, FL 34237	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GETZAN, CHERYL 2831 RINGLING BLVD STE 218F SARASOTA, FL 34238	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GETZAN, CHERYL 2831 RINGLING BLVD #218F SARASOTA, FL 34237	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GROVER, BRUCE 2831 RINGLING BLVD STE 218F SARASOTA, FL 34237	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SHELLHAMMER, PORTER 2831 RINGLING BLVD #218F SARASOTA, FL 34237	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GETZAN, MICHAEL 2831 RINGLING BLVD STE 218F SARASOTA, FL 34237	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BITNER, KEN 2831 RINGLING BLVD #218F SARASOTA, FL 34237	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUCHAN, PETE 2831 RINGLING BLVD #218F SARASOTA, FL 34237	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHROEDER, JOHN 2831 RINGLING BLVD #218F SARASOTA, FL 34237	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRAVCHAK, HAROLD 2831 RINGLING BLVD #218F SARASOTA, FL 34237	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Porter T. Shellhammer</u> PORTER T. SHELLHAMMER <u>28 APR 2006</u> <u>941.351-0594</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					