

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2005 8:00 am
Secretary of State

04-15-2005 90084 021 ****61.25

DOCUMENT # N27454

1. Entity Name
THE FOREST COUNTRY CLUB, INC.



Principal Place of Business
**6100 CLUB BLVD., S.W.
FT. MYERS, FL 33908-4340**

Mailing Address
**6100 CLUB BLVD., S.W.
FT. MYERS, FL 33908-4340**

90000000



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04082005 Chg-NP

CR2E037 (10/03)

4. FEI Number
65-0066096

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BRUHNKE, CHRIS
6100 CLUB BOULEVARD SW
FORT MYERS, FL 33908**

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)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

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

TITLE **D** ☒ Delete
NAME **HERGENHAHN, WARREN**
STREET ADDRESS **16647 BOBCAT COURT**
CITY-ST-ZIP **FT MYERS, FL 33908**

TITLE **P** ☒ Delete
NAME **FERGUSON, ROSE**
STREET ADDRESS **16935 TIMBERLAKES DR.**
CITY-ST-ZIP **FORT MYERS, FL 33908**

TITLE **VP** ☐ Delete
NAME **DUFFY, THODORE**
STREET ADDRESS **16848 FOX DEN S.W.**
CITY-ST-ZIP **FORT MYERS, FL 33908**

TITLE **T** ☐ Delete
NAME **TUCKER, DALE**
STREET ADDRESS **6099 SPOTTED FAWN COURT**
CITY-ST-ZIP **FORT MYERS, FL 33908**

TITLE **D** ☒ Delete
NAME **CREGER, ROBERT**
STREET ADDRESS **16682 BOBCAT DR. SW**
CITY-ST-ZIP **FORT MYERS, FL 33908**

TITLE **D** ☐ Delete
NAME **MINTA, THOMAS**
STREET ADDRESS **16707 BOBCAT DR. SW**
CITY-ST-ZIP **FORT MYERS, FL 33908**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Vice President** ☐ Change ☒ Addition
NAME **Ronald McEwan**
STREET ADDRESS **16115 Bobcat Drive**
CITY-ST-ZIP **Fort Myers, FL 33908**

TITLE **Secretary** ☐ Change ☒ Addition
NAME **Ruth McKillip**
STREET ADDRESS **16919 Timberlakes Drive**
CITY-ST-ZIP **Fort Myers, FL 33908**

TITLE **President** ☒ Change ☐ Addition
NAME **Theodore Duffy**
STREET ADDRESS **16848 Fox Den S.W.**
CITY-ST-ZIP **Fort Myers, FL 33908**

TITLE **Treasurer** ☒ Change ☐ Addition
NAME **Dale Tucker**
STREET ADDRESS **9063 Whitfield Drive**
CITY-ST-ZIP **Estero, FL 33928**

TITLE **Director** ☐ Change ☒ Addition
NAME **Robert Skaggs**
STREET ADDRESS **16983 Timberlakes Drive**
CITY-ST-ZIP **Fort Myers, FL 33908**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/13/05