

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28433

FILED  
Jan 04, 2006  
Secretary of State

**Entity Name:** MARIETTA FORREST HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

118 W ADAMS ST #1000  
JACKSONVILLE, FL 32202 US

**New Principal Place of Business:**

8632 DEVOE ST N  
JACKSONVILLE, FL 32220 US

**Current Mailing Address:**

118 W ADAMS ST #1000  
JACKSONVILLE, FL 32202 US

**New Mailing Address:**

PO BOX 43429  
JACKSONVILLE, FL 32203 US

FEI Number: 59-2960976

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHULTZ, JOHN R  
118 W ADAMS ST #1000  
JACKSONVILLE, FL 32202 US

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

SPEAKER, RICHARD  
9421 ORME RD  
JACKSONVILLE, FL 32220 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: RICHARD SPEAKER

01/04/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SCHULTZ, JOHN R  
Address: 118 W ADAMS STREET 1000  
City-St-Zip: JACKSONVILLE, FL 32202

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: D (X) Change ( ) Addition  
Name: SPEAKER, RICHARD  
Address: PO BOX 43429  
City-St-Zip: JACKSONVILLE, FL 32203

Title: D ( ) Change (X) Addition  
Name: SPEAKER, MICHELE  
Address: PO BOX 43429  
City-St-Zip: JACKSONVILLE, FL 32203

Title: D ( ) Change (X) Addition  
Name: MULLIS, MICHELE  
Address: PO BOX 43429  
City-St-Zip: JACKSONVILLE, FL 32203

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD SPEAKER

D

01/04/2006

Electronic Signature of Signing Officer or Director

Date