FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # N45441 (5)								
FOREST GREEN PROPERTY OWNERS' ASSOCIATION, INC.								
Principal Place of Business Mailing Address								
201 E. PINE ST. 201 E. PINE ST.								
SUITE 1200 SUITE 1200								
ORLANDO F	L 32801	ORLANDO FL 32801				3. Date incorporated or Qualified	3a. Date of Li	
Principal Place of Business 2a. Mailing Address						10/03/1991 4. FEI Number	1 00/0	1/1995
21 FILLOPALES	rincipal Place of Business 26. Mailing Address 26.					59-3092830	-	Applied For Not Applicable
	uite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired		75 Additional
	City & State City & State					6. Election Campaign Financing	C 5	.00 May Be
23	28					Trust Fund Contribution		ided to Fees
Ζφ 24	Country Zip Cou			ntry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent		
				81 N	arne			
PRICE, PAMELA O.				82 S	2 Street Address (P.O. Box Number is Not Acceptable)			
201 EAST PINE STREET			-	83				
SUITE 1200 ORLANDO FL 32801			Į.		"			
ONLANDO PL 32001				84 City			FL 85	Zip Code
11. Pursuant t	to the provisions of Sections 617.0502	2 and 617.1508, Florida Statute	es, the above	ve-nam	ed corpor	ation submits this statement for the purp d of directors. I hereby accept the appo	pose of changing i	ts registered office
familiar wi	th, and accept the obligations of, Seci	tion 617.0503, Florida Statutes		Orpora	ion s boar	d of directors. Thereby accept the appo	mitment as registe	reo agent. ram
SIGNATURE .	Signature, typed or printed name of registered agent		TE 6				DATE	
12.		r and little if a policable. INO	13.	Agent sig	nature required	d when reinstating) ADDITIONS/CHANGES TO OFFI		TORS IN 12
TITLE			1.1 TIT	1.1 TITLE			Chan	ge Addition
NAME	BRYAN, JAMES B., III		1.2 NAME					
STREET ADDRESS	254 DRIGGS DRIVE		1.3 STREET ADDRESS		RESS			
CITY - ST - ZIP				1.4 CITY - ST - ZIP				
TITLE				2.1 TITLE			Chan	ge 🔲 Addition
NAME	1111,0011, DE1111			2.2 NAME 2.3 STREET ADDRESS				
STREET ADDRESS CITY-ST-ZiP	254 DRIGGS DRIVE WINTER PARK FL		2.3 STREET AUDRESS					j
TITLE	D DELETE		3.1 TITLE				☐ Chan	ge
NAME	_		3.2 NA	3.2 NAME			_	_
STREET ADDRESS	254 DRIGGS DRIVE		3.3 STI	3.3 STREET ADDRESS				
CITY - ST - ZIP			3.4. CI	ITY - ST - Z	IP.			
TITLE		☐DELETE 4.1					Chan	ge 🔲 Addition
NAME DISPET ADDRESS			4. 2 N/		DECO			ļ
STREET ADDRESS				REET ADD TY-ST-ZI				
CITY-ST-ZIP THILE		DELETE	4.4 CH 5.1 TiT				☐ Chan	ge Addition
NAVE		1	5.2 NA				— - 1	
STREET ADDRESS			5.3 STI	REET ADD	RESS			
CITY-ST-ZIP			5.4 CIT	TY-ST-Z	P			
TITLE		DELETE	6.1 TIT				Chan-	ge 🔲 Addition
NAME			6.2 NA					ļ
STREET ADDRESS				REET ADD				
14. Ldo bereb	Lev certify that the information supplied	with this filing is voluntarily furn		ty-\$t- <i>z</i> i does no		or the exemption stated in Section 119.0	07(3)(k). Florida St	atutes, i further
certify that	t the information indicated on this ann	ual report or supplemental ann	ual report is	s true a	nd accura	te and that my signature shall have the	same legal effect a	as if made under

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2. 20.96 467-678-6000 Date Desptrace Prone #