

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000642

FILED
Apr 24, 2008
Secretary of State

Entity Name: FORREST PARK ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2715 SE 25TH CT.
OCALA, FL 344710707 US

New Principal Place of Business:

Current Mailing Address:

2715 SE 25TH CT.
OCALA, FL 344710707 US

New Mailing Address:

FEI Number: 59-3163152

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHADDIX, STEVEN
2410 SE 19TH ST.
OCALA, FL 344710706 US

Name and Address of New Registered Agent:

MORRISON, JACK
2406 SE 28TH ST.
OCALA, FL 344710706 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: JACK MORRISON

04/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: JACKSON, CAROL
Address: 2619 SE 25TH CT
City-St-Zip: OCALA, FL 344710707

Title: VP () Delete
Name: MORRISON, SARA
Address: 2406 SE 28TH ST
City-St-Zip: OCALA, FL 344740707

Title: TREA () Delete
Name: O'CONNER, JAMIE T
Address: 2715 SE 25TH CT.
City-St-Zip: OCALA, FL 344710707

Title: S () Delete
Name: COPELAND, APRIL
Address: 2615 SE 25TH CT.
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MORRISON, JACK
Address: 2406 SE 28TH ST
City-St-Zip: OCALA, FL 344710707

Title: VP (X) Change () Addition
Name: LORA, JUAN
Address: 2405 SE 28TH ST
City-St-Zip: OCALA, FL 344740707

Title: TREA (X) Change () Addition
Name: O'CONNOR, JAMIE T
Address: 2715 SE 25TH CT.
City-St-Zip: OCALA, FL 344710707

Title: S (X) Change () Addition
Name: JACKSON, CAROL
Address: 2619 SE 25TH CT.
City-St-Zip: OCALA, FL 344710707

I hereby certify that the information supplied with this filing does not qualify 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: JAMIE T. O'CONNOR

TREA

04/24/2008

Electronic Signature of Signing Officer or Director

Date