

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000002358

1. Entity Name

FOREST TOWNE PROPERTY OWNERS ASSOCIATION, INC.



FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90015 019 ****61.25

Principal Place of Business

3051 N.E. 111TH PL.
JASPER FL 32052
US

Mailing Address

3051 N.E. 111TH PL.
JASPER FL 32052
US

2. Principal Place of Business

11080 nw. 30th way
Suite, Apt. #, etc.

3. Mailing Address

11080 30th way
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Jasper, Florida

City & State

Jasper, Florida

4. FEI Number

59-3207635

Applied For

☒ Not Applicable

Zip

32052

Country

Hamilton

Zip

32052

Country

Hamilton

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RYAN, MATTHEW
3051 N.E. 111TH PL.
JASPER FL 32052

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.

SIGNATURE

Matthew Ryan

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9/10/00

DATE

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME RYAN, MATTHEW
STREET ADDRESS 3051 N.E. 111TH PL.
CITY-ST-ZIP JASPER FL 32052 ☐ Delete

TITLE VPD
NAME GOULD, JAMES
STREET ADDRESS RT 3 BOX 69-A
CITY-ST-ZIP JASPER FL 32052 ☒ Delete

TITLE T
NAME GILKINSON, EDGEL
STREET ADDRESS 3399 111 PLACE
CITY-ST-ZIP JASPER FL 32052 ☐ Delete

TITLE ST
NAME RYAN, JENNIFER
STREET ADDRESS 3051 N.E. 111TH PL.
CITY-ST-ZIP JASPER FL 32052 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPD
NAME Donald O'Connell
STREET ADDRESS 11080 nw. 30th way
CITY-ST-ZIP Jasper, FL 32052 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Matthew Ryan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/10/00
Date

904-792-3064
Daytime Phone #

CR2E037 (5/00)