

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2006 8:00 am
Secretary of State

02-10-2006 90011 031 ****61.25

DOCUMENT # N93000002358

1. Entity Name
FOREST TOWNE PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business
**3086 NW 111TH PLACE
JASPER, FL 32052 US**

Mailing Address
**3086 NW 111TH PLACE
JASPER, FL 32052 US**

20000344



2. Principal Place of Business

3. Mailing Address

01222006 Chg-NP CR2E037 (11/05)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-3207635

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CARNAHAN, JOE E
3086 NW 111TH PLACE
JASPER, FL 32052**

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, 2006

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Delete
NAME **CARNAHAN, JOE E**
STREET ADDRESS **3086 NW 111TH PLACE**
CITY-ST-ZIP **JASPER, FL 32052**

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

TITLE **ST** ☐ Delete
NAME **HILWARD, DOROTHY**
STREET ADDRESS **11153 NW 31ST TERRACE**
CITY-ST-ZIP **JASPER, FL 32052**

TITLE **M** ☐ Delete
NAME **HILLIARD, DONALD**
STREET ADDRESS **11153 NW 31ST TERRACE**
CITY-ST-ZIP **JASPER, FL 32052**

TITLE **M** ☐ Delete
NAME **RYAN, HARRY**
STREET ADDRESS **3090 NW 111TH CT**
CITY-ST-ZIP **JASPER, FL 32052**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Edgel H. Gilkinson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EDGEL H. GILKINSON

02/09/2006

Date

792-3193

Daytime Phone #