

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2006 8:00 am
Secretary of State

01-31-2006 90011 034 ****61.25

DOCUMENT # N94000000792

1. Entity Name
**THE HOMES AT FOREST LAKE HOMEOWNERS
ASSOCIATION, INC.**



Principal Place of Business
4780 N STATE ROAD 7, STE E250
LAUDERDALE LAKES, FL 33319 US

Mailing Address
4780 N STATE ROAD 7, STE E250
LAUDERDALE LAKES, FL 33319 US

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01092006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-0468197

Applied For
Not Applicable

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

PHOENIX MANAGEMENT SERVICES, INC
4780 N STATE ROAD 7, STE E250
LAUDERDALE LAKES, FL 33319

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 ☐ Delete
NAME **VD**
STREET ADDRESS **HUGHES, DOROTHY**
CITY-ST-ZIP **5957 SW 112 LN
COOPER CITY, FL 33330**

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

TITLE ☐ Delete
NAME **PD**
STREET ADDRESS **ROGERS, LINDA**
CITY-ST-ZIP **11227 SW 59 STREET
COOPER CITY, FL 33330**

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

TITLE ☒ Delete
NAME **SD**
STREET ADDRESS **ISAACS, GREGORY**
CITY-ST-ZIP **5998 SW 112TH DRIVE
COOPER CITY, FL 33330**

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

TITLE ☐ Delete
NAME **William Jimeno**
STREET ADDRESS **5957 SW 112 Ave**
CITY-ST-ZIP **Cooper City, FL 33330**

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

TITLE ☐ Delete
NAME **Joseph Russo**
STREET ADDRESS **5988 SW 112th Drive**
CITY-ST-ZIP **Cooper City, FL 33330**

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

TITLE ☐ Delete
NAME
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 or empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #