

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortonham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # N94000003347 (1)

1. Corporation Name

FOREST GLADE VILLAGE ASSOCIATION, INC.

95 APR 12 PM 11:53

Principal Place of Business

Mailing Address

3300 PGA BLVD SUITE 900
PALM BEACH GARDENS FL 33410

3300 PGA BLVD SUITE 900
PALM BEACH GARDENS FL 33410

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/01/1994

3a. Date of Last Report

4. FFI Number

65-0569420

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

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5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status

☐ \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHENK, CARL K
3300 PGA BLVD SUITE 900
PALM BEACH GARDENS FL 33410

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent Signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME BROWN, DOWDELL
STREET ADDRESS 3300 PGA BLVD SUITE 900
CITY - ST - ZIP PALM BEACH GARDENS FL 33410

TITLE D
NAME SCHENK, CARL K
STREET ADDRESS 3300 PGA BLVD SUITE 900
CITY - ST - ZIP PALM BEACH GARDENS FL 33410

TITLE PD
NAME FRANKLIN, MAUREEN A
STREET ADDRESS 3300 PGA BLVD SUITE 900
CITY - ST - ZIP PALM BEACH GARDENS FL 33410

TITLE V
NAME HONIG, STEPHEN
STREET ADDRESS 3300 PGA BLVD SUITE 900
CITY - ST - ZIP PALM BEACH GARDENS FL 33410

TITLE S
NAME SHORE, STEPHEN L
STREET ADDRESS 3300 PGA BLVD SUITE 900
CITY - ST - ZIP PALM BEACH GARDENS FL 33410

TITLE T
NAME TAYLOR, LOIS S
STREET ADDRESS 3300 PGA BLVD SUITE 900
CITY - ST - ZIP PALM BEACH GARDENS FL 33410

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

PRESIDENT
C.K. SCHENK
3300 PGA BLVD SUITE 900
PALM BEACH GARDENS, FL 33410

TREASURER
SHORE, STEPHEN L.
3300 PGA BLVD SUITE 900
PALM BEACH GARDENS FL 33410

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1.10.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 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

DATE

OFFICIAL PRINT