

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001988

FILED
Mar 15, 2011
Secretary of State

Entity Name: FOREST LAKE SOCIAL CLUB, INC.

Current Principal Place of Business:

6355 SPRING LAKE CIRCLE
ZEPHYRHILLS, FL 33540

New Principal Place of Business:

Current Mailing Address:

6355 SPRING LAKE CIRCLE
ZEPHYRHILLS, FL 33540

New Mailing Address:

FEI Number: 59-3143131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALFIERI, MARY ANN
5929 UTOPIA DR
ZEPHYRHILLS, FL 33540 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: ALFIERI, MARY ANN
Address: 5929 UTOPIA DR
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: VP
Name: LAPANNE, MARION
Address: 6033 PRESIDENTIAL CIR
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: S
Name: HUETTEN, CAROLE
Address: 5630 VILLA WAY
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: T
Name: YESTA, STEVE
Address: 6060 JESSUP DR
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: D
Name: MOORE, PHYLLIS
Address: 5849 NAPLES
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: D
Name: KEFFER, TOM
Address: 6232 PRESIDENTIAL CIR
City-St-Zip: ZEPHYRHILLS, FL 33540

I hereby 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 all other like empowered.

SIGNATURE: MARY ANN ALFIERI

P

03/15/2011

Electronic Signature of Signing Officer or Director

Date