

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004134

FILED
Jan 16, 2012
Secretary of State

Entity Name: FOREST OAK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O MIAMI MANAGEMENT INC
1145 SWAGRASS CORP PKWY
FORT LAUDERDALE, FL 33323 US

New Principal Place of Business:

Current Mailing Address:

C/O MIAMI MANAGEMENT INC
1145 SWAGRASS CORP PKWY
FORT LAUDERDALE, FL 33323 US

New Mailing Address:

FEI Number: 65-0856353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATZMAN GARFINKEL & BERGER
5297 W. COPANS RD.
MARGATE, FL 33063 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: PD
Name: GROHOWSKI, DAHLIA
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: TD
Name: MINEO, JOSEPH
Address: 1145 SAWGRASS CORPORATE PARKWAY
City-St-Zip: SUNRISE, FL 33323

Title: VPD
Name: BEST, JEFF
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: D
Name: ASTON, DON
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: FORT LAUDERDALE, FL 33323

Title: SCT
Name: WARING, CRAIG
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

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: DEE GROHOWSKI

PD

01/16/2012

Electronic Signature of Signing Officer or Director

_____ Date