FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailine Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P03705

1. Corporation Name

FOREST PARK SPRINGS B.V., INC.

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90061 036 ***150.00



Principal Place	e of Business	Mailing Address						
175 LOOKOUT PLACE 175 LOOKOUT PLACE								
STE 201 STE 201					DO NOT MOTE IN THIS SPACE			
MAITLAND FL 32751 MAITLAND FL 32751						DO NOT WRITE IN THIS SPACE		
US US					1 1 1 1	3. Date Incorporated or Qualifed		
					10/16/1984			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	pplied For	
21 26					98-0068972	<u>N</u>	lot Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.	¬		5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State City & State					6. Election Campaign Financing	\$5.00	May Be	
		⊢ ¬ ′			Trust Fund Contribution		to Fees	
23	Zip Country Zip		Country		This corporation owes the current year Interest.			
Zip			¬ ′		Personal Property Tax.	∏ Yes	□No	
24	25		01		10. Name and Address of New Registered			
 	9. Name and Address of Current	Registered Agent		1 Name		-yem		
	2011 10		P	Name				
LEERDAM, A.C. 175 LOOKOUT PLACE			8	2 Street	Address (P.O. Box Number is Not Acceptable)			
STE 201			8	3				
MAITLAND FL 32751			8	4 City	FL	85 Zip	Code	
		and CO7 4500 Florida Statutos	the ebe	vo named		changing if	ts registered	
office or re agent. I a	egistered agent, or both, in the State of familiar with, and accept the obligat	of Florida. Such change was autions of, Section 607.0505, Florid	horized b	y the corp	corporation submits this statement for the purpose of poration's board of directors. I hereby accept the appoint	ntment as r	registered	
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE: R	egistered Ag	ent signature	required when reinstating) DATE			
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECT	ORS IN 12	
TITLE	0	☐ DELETE	1.1 TITLE	:		Change	e 🔲 Addition (
NAME	VAN DEN BERG, GERRITT J.		1.2 NAM	.			ſ	
1	BODEGRAAFSESTRAATWEG 16	29	•	ET ADDRESS	,			
STREET ADDRESS							ţ	
C/TY-ST-Z/P	2805 GN GOUDA NETHERS	☐ DELETE	1.4 CITY-			Change	Addition	
TITLE	AIF	□ DELETE	2.1 TITLE				,	
NAME	LEERDAM, A.C.		2.2 NAM	Ē			}	
STREET ADDRESS	175 LOOKOUT PLACE STE 201		2.3 STRE	ET ADDRESS				
CITY-ST-ZIP	MAITLAND FL		2. 4 C/TY	-ST-ZIP				
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NAME			3.2 NAM	E			Į	
STREET ADDRESS				ET ADDRESS			{	
			3.4. CITY				ſ	
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NAME			4. 2 NAM				ļ	
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CITY-ST-ZIP			4.4 CITY					
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NAME			5.2 NAMI	Ē			Ţ	
STREET ADDRESS			5.3 STRE	ET ADDRESS	6			
CITY-ST-ZIP			5.4 CITY	-ST-ZIP			J	
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition	
1 :			6.2 NAM	E				
NAME				ET ADDRESS			ļ	
STREET ADDRESS			0.3 3 (RE	こっていいろん	' \		i	

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, from attachment with an address, with all other like empowered.

COUNTED

G OFFICER OR DIRECTOR

6.4 CITY-ST-ZIP

SIGNATURE:

CR2E034 (11/98)