

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

FILED  
Mar 13 1998 8:00am  
Secretary of State

|                                                |                                                                                   |                                                                                                    |
|------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| PROFIT<br>CORPORATION<br>ANNUAL REPORT<br>1998 |  | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|

DOCUMENT # P93000018098 (2)

1. Corporation Name

FOREST LAKE ESTATES HOMEOWNERS ASSOCIATION 1993, INC.

Principal Place of Business

%GLORIAL MOORE  
5649 VIAU WAY  
ZEPHYRHILLS FL 33540  
US

Mailing Address

P.O. BOX 309  
6149 SPRING LAKE CIR.  
ZEPHYRHILLS FL 33540  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/02/1993

4. FEI Number

59-3172328

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

MOORE, GLORIAL  
5649 VIAU WAY  
ZEPHYRHILLS FL 33540

10. Name and Address of New Registered Agent

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 file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

|                |                      |        |
|----------------|----------------------|--------|
| TITLE          | P                    | DELETE |
| NAME           | LANDRY, DARA         |        |
| STREET ADDRESS | 6049 SPRING LAKE CR. |        |
| CITY-ST-ZIP    | ZEPHYRHILLS FL 33540 |        |
| TITLE          | V                    | DELETE |
| NAME           | MOORE, GLORIAL       |        |
| STREET ADDRESS | 5649 VIAU WAY        |        |
| CITY-ST-ZIP    | ZEPHYRHILLS FL       |        |
| TITLE          | T                    | DELETE |
| NAME           | SNOWDEN, VICTOR      |        |
| STREET ADDRESS | 6014 FOREST LAKE DR  |        |
| CITY-ST-ZIP    | ZEPHYRHILLS FL       |        |
| TITLE          | S                    | DELETE |
| NAME           | MARCELLA, DONNA      |        |
| STREET ADDRESS | 6125 JESSUP DR.      |        |
| CITY-ST-ZIP    | ZEPHYRHILLS FL 33540 |        |
| TITLE          | D                    | DELETE |
| NAME           | WACKERLE, LORN       |        |
| STREET ADDRESS | 6021 FOREST LAKE DR. |        |
| CITY-ST-ZIP    | ZEPHYRHILLS FL 33540 |        |
| TITLE          | D                    | DELETE |
| NAME           | HEWES, VERN          |        |
| STREET ADDRESS | 6418 JESSUP DR.      |        |
| CITY-ST-ZIP    | ZEPHYRHILLS FL       |        |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |                      |        |          |
|--------------------|----------------------|--------|----------|
| 1.1 TITLE          | P                    | Change | Addition |
| 1.2 NAME           | EDGAR C IRVING       |        |          |
| 1.3 STREET ADDRESS | 6233 PRESIDENTIAL CI |        |          |
| 1.4 CITY-ST-ZIP    | ZEPHYRHILLS FL 33540 |        |          |
| 2.1 TITLE          | V                    | Change | Addition |
| 2.2 NAME           | RUSSEL MCGINNIS      |        |          |
| 2.3 STREET ADDRESS | 5731 VIAU WAY        |        |          |
| 2.4 CITY-ST-ZIP    | ZEPHYRHILLS FL 33540 |        |          |
| 3.1 TITLE          | T                    | Change | Addition |
| 3.2 NAME           | RAE RACZKOWSKI       |        |          |
| 3.3 STREET ADDRESS | 6410 UTOPIA DR       |        |          |
| 3.4 CITY-ST-ZIP    | ZEPHYRHILLS FL 33540 |        |          |
| 4.1 TITLE          | S                    | Change | Addition |
| 4.2 NAME           | JACK PARRY           |        |          |
| 4.3 STREET ADDRESS | 6103 FOREST LAKE DR  |        |          |
| 4.4 CITY-ST-ZIP    | ZEPHYRHILLS FL 33540 |        |          |
| 5.1 TITLE          | D                    | Change | Addition |
| 5.2 NAME           | DAN WARD             |        |          |
| 5.3 STREET ADDRESS | 5936 UTOPIA DR       |        |          |
| 5.4 CITY-ST-ZIP    | ZEPHYRHILLS FL 33540 |        |          |
| 6.1 TITLE          | D                    | Change | Addition |
| 6.2 NAME           | JOHN DAVIS           |        |          |
| 6.3 STREET ADDRESS | 5741 VIAU WAY        |        |          |
| 6.4 CITY-ST-ZIP    | ZEPHYRHILLS FL 33540 |        |          |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplement to 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, or on an Attachment with an address.

SIGNATURE

9 "E C IRVING" 3/5/98 813-780 8631

CR2E034 (1097)