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97 MAY 12 AM 11:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # [REDACTED] V08388
1. Corporation Name [REDACTED] forest apartments, inc.

Principal Place of Business
6429 FOREST LAKE DR
ZEPHYRHILLS FL 33540

Mailing Address
6429 FOREST LAKE DR
ZEPHYRHILLS FL 33540-7530

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0313397		Not Applicable	
22		27		5. Certificate of Status Desired		8.75 Additional Fee Required	
City & State		City & State		<input type="checkbox"/>		<input type="checkbox"/>	
23		28		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
Zip		Zip		<input type="checkbox"/>		<input type="checkbox"/>	
24		29		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Country		Country		30			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
PAQUETTE, CHRISTIAN 6429 FOREST LAKE DR ZEPHYRHILLS FL 33540				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] CHRISTIAN PAQUETTE 4/30/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE [] DELETE				1.1 TITLE [] Change [] Addition			
NAME D, V PAQUETTE, CHRISTIAN				1.2 NAME			
STREET ADDRESS 6429 FOREST LAKE DR				1.3 STREET ADDRESS			
CITY-ST-ZIP ZEPHYRHILLS FL 33540				1.4 CITY-ST-ZIP			
TITLE [] DELETE				2.1 TITLE [] Change [] Addition			
NAME D, P				2.2 NAME			
STREET ADDRESS RACINE, YVON				2.3 STREET ADDRESS			
CITY-ST-ZIP 9901 Davis Street				2.4 CITY-ST-ZIP			
TITLE [] DELETE				3.1 TITLE [] Change [] Addition			
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP Gibsonton, FL 33534				3.4 CITY-ST-ZIP			
TITLE [] DELETE				4.1 TITLE [] Change [] Addition			
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE [] DELETE				5.1 TITLE [] Change [] Addition			
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE [] DELETE				6.1 TITLE [] Change [] Addition			
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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, or on an attachment with an address.

SIGNATURE: [Signature] CHRISTIAN PAQUETTE 4/30/97 8/3 783 7979
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)