

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754584

**FILED
Mar 21, 2013
Secretary of State
CC9302575822**

Entity Name: FOREST LAKE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

COMMUNITY MANAGEMENT SERVICES, INC.
5837 TROUBLE CREEK ROAD
NEW PORT RICHEY, FL 34652

Current Mailing Address:

COMMUNITY MANAGEMENT SERVICES, INC.
5837 TROUBLE CREEK ROAD
NEW PORT RICHEY, FL 34652

FEI Number: 59-2307872

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT SERVICES, INC.
5837 TROUBLE CREEK ROAD
NEW PORT RICHEY, FL 34652 US

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

Officer/Director Detail :

Title PD
Name TROY, CHARLES
Address 5837 TROUBLE CREEK ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

Title SD
Name MURRIN, CONNIE
Address 5837 TROUBLE CREEK ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

Title VPD
Name DINAN, STEPHEN
Address 5837 TROUBLE CREEK ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

Title TD
Name MASON, NANCY
Address 5837 TROUBLE CREEK ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

Title D
Name SAPIENZA, JOSEPH
Address 5837 TROUBLE CREEK ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

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: CHARLES TROY

PRESIDENT

03/21/2013

Electronic Signature of Signing Officer/Director Detail

Date