

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21096

FILED
Mar 31, 2020
Secretary of State
4906813474CC

Entity Name: EMERALD FOREST ROAD ASSOCIATION, INC.

Current Principal Place of Business:

C/O FIRSTSERVICE RESIDENTIAL
12794 FOREST HILL BLVD. SUITE 31
WELLINGTON, FL 33414

Current Mailing Address:

C/O FIRSTSERVICE RESIDENTIAL
12794 FOREST HILL BLVD. SUITE 31
WELLINGTON, FL 33414 US

FEI Number: 65-0056879

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOURNEY, JOHN TREASURER
1352 LAKE BREEZE DRIVE
WELLINGTON, FL 33414 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: JOHN FOURNEY

03/31/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name ZIKER, ALAN
Address C/O FIRSTSERVICE RESIDENTIAL
12794 FOREST HILL BLVD. SUITE 31
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR
Name ISOLA, JOHN
Address C/O FIRSTSERVICE RESIDENTIAL
12794 FOREST HILL BLVD. SUITE 31
City-State-Zip: WELLINGTON FL 33414

Title TREASURER, SECRETARY
Name FOURNEY, JOHN
Address C/O FIRSTSERVICE RESIDENTIAL
12794 FOREST HILL BLVD. SUITE 31
City-State-Zip: WELLINGTON FL 33414

Title PRESIDENT
Name CAMERON, CLIFF
Address C/O FIRSTSERVICE RESIDENTIAL
12794 FOREST HILL BLVD. 31
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR
Name FRAME, MARTIN
Address C/O FIRSTSERVICE RESIDENTIAL
12794 FOREST HILL BLVD. SUITE 31
City-State-Zip: WELLINGTON FL 33414

Title VP
Name SARRINGER, JEFF
Address C/O FIRSTSERVICE RESIDENTIAL
12794 FOREST HILL BLVD. SUITE 31
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR
Name WEISSMAN, ALAN
Address C/O FIRSTSERVICE RESIDENTIAL
12794 FOREST HILL BLVD. SUITE 31
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR
Name REESE, RANDY
Address C/O FIRSTSERVICE RESIDENTIAL
12794 FOREST HILL BLVD. SUITE 31
City-State-Zip: WELLINGTON FL 33414

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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: CLIFF CAMERON

PRESIDENT

03/31/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WRENN, WILLIAM
Address C/O FIRSTSERVICE RESIDENTIAL
 12794 FOREST HILL BLVD. SUITE 31
City-State-Zip: WELLINGTON FL 33414