2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2023
Secretary of State
8163861158CC

DOCUMENT# N93000000720

Entity Name: FOREST POINTE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

QUALIFIED PROPERTY MANAGEMENT, INC
5901 US HWY 19 STE. 7Q
NEW PORT RICHEY, FL 34652

Current Mailing Address:

QUALIFIED PROPERTY MANAGEMENT, INC
5901 US HWY 19 STE. 7Q
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-3173967

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

QUALIFIED PROPERTY MANAGEMENT, INC.
QUALIFIED PROPERTY MANAGEMENT, INC
5901 US HWY 19 STE. 7Q
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: MARY A. WHITE 03/17/2023

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT, TREASURER	Title	VP
Name	WHITTON, JOE	Name	COLLETTE, EUGENE
Address	QUALIFIED PROPERTY MANAGEMENT, INC 5901 US HWY 19 STE. 7Q	Address	QUALIFIED PROPERTY MANAGEMENT, INC 5901 US HWY 19 STE. 7Q
City-State-Zip:	NEW PORT RICHEY FL 34652	City-State-Zip:	NEW PORT RICHEY FL 34652
Title	SECRETARY	Title	DIRECTOR
Name	CUSACK, DEBORAH	Name	PALAKKAT, MAX
Address	QUALIFIED PROPERTY MANAGEMENT, INC 5901 US HWY 19 STE. 7Q	Address	QUALIFIED PROPERTY MANAGEMENT, INC 5901 US HWY 19 STE. 7Q
City-State-Zip:	NEW PORT RICHEY FL 34652	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: JOE WHITTON PRESIDENT 03/17/2023

Electronic Signature of Signing Officer/Director Detail — Date