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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name 717442

(8)

FAIRVIEW ASSOCIATION II AND III, INC.

		N. W. Address				IRDA DUDKI DIBUL DIBUL DI	
Principal Place of Business Mailing Address							
2501-2525 WES		2501-2525 WEST GOLF					
POMPANO BEA	ACH FL 33064	POMPANO BEACH FL 3	33004	-	Date Incorporated or Qualified	3a. Date of La	ast Report
					10/27/1969	04/27	
2. Principal Plac	on of Puninger	2a. Mailing Address			4. FEI Number	1 3,721	Applied For
	Ce di Business	26			59-1967711		Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1	<b>75</b> Additional
2	•	27			5. Germonie of States Desired		ee Required
City & State		City & State		ļ	6. Election Campaign Financing		.00 May Be
23		28			Trust Fund Contribution	Au	ided to Fees
Zip	Country	Zip	Country 30		This corporation has liability for in Florida Statutes	ntangibie tal unde No	1 8. 199.032,
4	25 9. Name and Address of Currer	29 Agent	1301		10. Name and Address of New Ro		
	9. Name and Address of Contr.	it mogratorou rigani	81 N	lame			
ULIDERT	IOCCOL A		<b>82</b> S	treat Adores	s (P.O. Box Number is Not Acceptable	le}	
HUBERT, JOSEPH A. 2400 E COMMERCIAL BVLD.						·	
	ERDALE FL 33308		83				
, 1700			84 C	City		85	Zip Code
			1	•	ion submits this statement for the pur	FL  °°	
	h, and accept the obligations of, Sect						
SIGNATURE _	Signature, typeo or printed name of registered ages	Land the itappie abies (N	Olf Registered Agert sig	gnature required w	eken renstatings ADDITIONS "CHANGES TO OFFI	DATE ICERS AND DIREC	STORS IN 12
SIGNATURE _	Signature, typeo or printed name of registered automo- OFFICERS AN		OTE Registered Agent sig	gnature regulied w	ADDITIONS CHANGES TO OFF		
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For hereby certify that the information supplied with this litting is voluntarily furnished artifuldes not does not qualify for the extemption stated in destroin indicated on this annual report or supplicemental annual report is, sive 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an address SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4/24/96 954-782-5476

Janet Rae Candlish