

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 22, 2005 8:00 am**  
**Secretary of State**

04-22-2005 90604 001 \*\*\*980.00

**DOCUMENT # 717442**

1. Entity Name  
**FAIRVIEW ASSOCIATION II AND III, INC.**



Principal Place of Business  
**2501-2525 WEST GOLF BLVD  
POMPANO BEACH, FL 33064**

Mailing Address  
**2501-2525 WEST GOLF BLVD  
POMPANO BEACH, FL 33064**

**66012494**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03032005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number  
**59-1967711**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**POLIAKOFF, GARY A  
BECKER & POLIAKOFF, P.A.  
3111 STIRLING ROAD  
FT. LAUDERDALE, FL 33312**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25  
Due by May 1, 2005

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
ESPOSITO, VITO J ☒ Delete  
2525 W GOLF BLVD # 223  
POMPANO BEACH, FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
ATKINSON, HELEN ☒ Change ☐ Addition  
2525 W GOLF BLVD#230  
POMPANO BEACH, FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
GAUTHIER, LOIS ☐ Delete  
2501 W. GOLF BLVD., #132  
POMPANO BEACH, FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
GUILBAULT, JACQUES G ☐ Delete  
2501 W. GOLF BLVD #231  
POMPANO BEACH, FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
BOBBITT, JEANNE ☒ Delete  
2525 W. GOLF BLVD. #220  
POMPANO BEACH, FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
ANDERSON, CHARLES E., III ☒ Change ☐ Addition  
2501 W GOLF BLVD#131  
POMPANO BEACH, FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
KARLS, KENNETH G ☐ Delete  
2501 W GOLF BLVD # 128  
POMPANO BEACH, FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. I 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**954-782-8876**