2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 25, 2005 8:00 am
Secretary of State
04-01-2005 90003 024 ****61.25

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DOCUMENT # 739888

1. Entity Name

FAIRGREEN UNIT III OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
38 FORE DR. NEW SMYRNA BCH FL 32168 US	38 FORE DR. NEW SMYRNA BCH FL 32168 US

1st MOORE CR2E037 (10/04)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1786212 ☐ Applied For ☐ Not Applicable

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
BENNER, THOMAS M 19 FORE DR NEW SMYRNA BEACH FL 32168	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: Thomas M. Benner Treas. DATE: 3/27/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: 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	DVP MENSCH, CLARK 29 FORE DR NEW SMYRNA BEACH FL 32168	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Geyersbach, Liane 27 Fore Dr New Smyrna Beach FL 32168 — ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HANLEY, CLAIRE 32 FORE DR. NEW SMYRNA BEACH FL 32168	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD HANLEY, Claire 32 Fore Dr, New Smyrna Beach FL 32168 — ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ROMD, ELSA 37 FORE DR. NEW SMYRNA BEACH FL 32168	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BENNER, THOMAS M 19 FORE DR. NEW SMYRNA BEACH FL 32168	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MAYER, GEORGE 44 FORE DR. NEW SMYRNA BEACH FL 32168	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ELMORE, RAY 41 FORE DR NEW SMYRNA BCH FL 32168	☐ 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: Thomas M. Benner Trea — 3/27/05 — 3864279819
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Thomas M. BENNER, TREA