

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750381

FILED
Mar 30, 2009
Secretary of State

Entity Name: FAIRVIEW HOUSE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

17600 NORTH BAY ROAD
SUNNY ISLE BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

17600 NORTH BAY ROAD
SUNNY ISLE BEACH, FL 33160

New Mailing Address:

FEI Number: 59-1992795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHLOSS, MICHAEL M
750 N.E. 175TH STREET
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MCLAREN, NEIL
Address: 17600 N BAY RD #901N
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VOP () Delete
Name: SHEFFIELD, FRED
Address: 17500 N BAY RD, #805S
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: TRES () Delete
Name: MAGNANI, LEE
Address: 17500 N BAY RD., APT 808N
City-St-Zip: SUNNY ISLE BEACH, FL 33160

Title: S () Delete
Name: LASKY, CINDY
Address: 17600 N. BAY RD.#608N
City-St-Zip: SUNNY ISLE BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MACLAREN, NEIL
Address: 17600 N BAY RD #901N
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NEIL MACLAREN

PRES

03/30/2009

Electronic Signature of Signing Officer or Director

Date