

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H00340 (0)**

1. Corporation Name
FAIRWAY VILLAGE RESIDENTS ASSOCIATION, INC.



Principal Place of Business: **1100 BELCHER ROAD LARGO FL 34641**
Mailing Address: **1100 BELCHER ROAD LARGO FL 34641**

3. Date Incorporated or Qualified: **04/24/1984**
3a. Date of Last Report: **02/14/1995**

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

4. FEI Number: **59-2454926**
Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**WILSON, GEORGE W.
1100 S. BELCHER ROAD #788
LARGO FL 34641**

10. Name and Address of New Registered Agent
81 Name: **John R. Gustafson**
82 Street Address (P.O. Box Number is Not Acceptable): **1100 S. Belcher Rd. # 357**
83
84 City: **Largo, FL** 85 Zip Code: **34641**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *John R. Gustafson* (NOTE: Registered Agent signature required when reinstating) DATE: **3/7/96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: P	WILSON, GEORGE W.	1.1 TITLE: President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: WILSON, GEORGE W.	1100 S. BELCHER ROAD #788	1.2 NAME: John R. Gustafson	
STREET ADDRESS: 1100 S. BELCHER ROAD #788	LARGO FL	1.3 STREET ADDRESS: 1100 S. Belcher Rd. # 357	
CITY-ST-ZIP: LARGO FL		1.4 CITY-ST-ZIP: Largo, FL. 34641	
TITLE: D	WAFFLE, JEAN	2.1 TITLE: Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: WAFFLE, JEAN	1100 S BELCHER RD #640	2.2 NAME: Howard Wollen	
STREET ADDRESS: 1100 S BELCHER RD #640	LARGO FL	2.3 STREET ADDRESS: 1100 S. Belcher Rd. #214	
CITY-ST-ZIP: LARGO FL		2.4 CITY-ST-ZIP: Largo, FL. 34641	
TITLE: T	MCNAMARA, RICHARD J	3.1 TITLE: Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: MCNAMARA, RICHARD J	1100 BELCHER RD 676	3.2 NAME: Gladys Favata	
STREET ADDRESS: 1100 BELCHER RD 676	LARGO FL	3.3 STREET ADDRESS: 1100 S. Belcher Rd. #244	
CITY-ST-ZIP: LARGO FL		3.4 CITY-ST-ZIP: Largo, FL. 34641	
TITLE: S	RONSKE, MARGARET L.	4.1 TITLE: Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: RONSKE, MARGARET L.	1100 BELCHER RD., #763	4.2 NAME: 200001741532	
STREET ADDRESS: 1100 BELCHER RD., #763	LARGO FL	4.3 STREET ADDRESS: -03/13/96--01054--025	
CITY-ST-ZIP: LARGO FL		4.4 CITY-ST-ZIP: ***200.00	
TITLE: VP	STECHER, JOHN J.	5.1 TITLE: Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: STECHER, JOHN J.	1100 S. BELCHER ROAD #783	5.2 NAME: Melrose L. Brown	
STREET ADDRESS: 1100 S. BELCHER ROAD #783	LARGO FL	5.3 STREET ADDRESS: 1100 S. Belcher Rd. # 329	
CITY-ST-ZIP: LARGO FL		5.4 CITY-ST-ZIP: Largo, FL. 34641	
TITLE: D	MARSH, AMBROSE	6.1 TITLE: Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: MARSH, AMBROSE	1100 S. BELCHER ROAD #548	6.2 NAME:	
STREET ADDRESS: 1100 S. BELCHER ROAD #548	LARGO FL	6.3 STREET ADDRESS:	
CITY-ST-ZIP: LARGO FL		6.4 CITY-ST-ZIP:	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *John R. Gustafson* John R. Gustafson, 2/20/96 813/536-2705
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CFR2E034 (12/95)

3-13-96