

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 14, 2001 8:00 am**  
**Secretary of State**

0373072

**DOCUMENT # H00340**

1. Entity Name  
**FAIRWAY VILLAGE RESIDENTS ASSOCIATION, INC.**

03-14-2001 90213 020 \*\*\*150.00

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



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

4. FEI Number **59-2454926**      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

**YOSEN, DONALD**  
**1100 S BELCHER RD**  
**244**  
**LARGO FL 33771**

Name **Steven H. Mezer**  
 Street Address (P.O. Box Number is Not Acceptable)  
**270 BUSH ROSS GARDNER WARREN WOODY #**  
**220 S. FRANKLIN ST.**  
 City **TAMPA**      FL      Zip Code **33602**

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.

SIGNATURE **STEVEN H. MEZER**      3/12/01  
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating.)      DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.       **FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**      10. Election Campaign Financing Trust Fund Contribution.       **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CHAPLIN, WALLACE</b> <b>1100 S BELCHE RD 602</b> <b>LARGO FL 33771</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>CHAPLIN WALLACE</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>1100 S. BELCHER RD 602</b> <b>LARGO, FL 33771</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>DINAN, BOB</b> <b>1100 S BELCHER RD, #295</b> <b>LARGO FL 33771</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Harris Don</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>1100 S. Belcher Rd 742</b> <b>Largo 1 FL 33771</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>FAVATA, GLADYS</b> <b>1100 BELCHER RD #244</b> <b>LARGO FL 34641</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>FAVATA GLADYS</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>1100 BELCHER RD 244</b> <b>LARGO, FL 34641</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>YOSEN, DONALD</b> <b>1100 S BELCHER RD 421</b> <b>LARGO FL</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>VOCT, JAMES</b> <input checked="" type="checkbox"/> Delete <b>1100 S BELCHER RD.</b> <b>LARGO FL 33771</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S. RONALD DAVIS</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>1100 S. BELCHER RD #83</b> <b>LARGO, FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MARSH, AMBROSE</b> <input type="checkbox"/> Delete <b>1100 S. BELCHER ROAD #548</b> <b>LARGO FL</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **DONALD J YOSEN**      3/9/01      787-536-2705  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (10/00)