

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 07, 2002 8:00 am**  
**Secretary of State**

03-07-2002 90012 042 \*\*\*158.75

0462339 AV

**DOCUMENT # H00340**  
 1. Entity Name  
**FAIRWAY VILLAGE RESIDENTS ASSOCIATION, INC.**

Principal Place of Business <b>1100 BELCHER ROAD LARGO FL 34641</b>	Mailing Address <b>1100 BELCHER ROAD LARGO FL 34641</b>
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State	City & State
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4. FEI Number <b>59-2454926</b>	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  
**MEZER, STEVEN H.**  
**% BUSH ROSS GARDNER WARREN & RUBY A**  
**220 S FRANKLIN ST**  
**TAMPA FL 33602**

7. Name and Address of New Registered Agent  
 Name  
**William E. Nurre**  
 Street Address (P.O. Box Number is Not Acceptable)  
**1100 S. Belcher Rd.**  
 City  
**Largo** **FL** Zip Code  
**33771**

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 **William E. Nurre** *William E. Nurre* **2-22-02**  
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. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</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>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>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>P</b> <b>VOSEN, DONALD</b> <b>1100 S BELCHER RD 421</b> <b>LARGO FL</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>DAVIS, RONALD</b> <b>1100 S BELCHER RD. # 83</b> <b>LARGO FL</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MARSH, AMBROSE</b> <b>1100 S. BELCHER ROAD #548</b> <b>LARGO FL</b> <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP Donald Harris</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>1100 S. Belcher Rd. #742</b> <b>Largo, FL 33771</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>James Voet</b> <b>1100 S. Belcher Rd. #520</b> <b>Largo, FL 33771</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Ronald Davis</b> <b>1100 S. Belcher Rd. #83</b> <b>Largo, FL 33771</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Ambrose Marsh</b> <b>1100 S. Belcher Rd. #548</b> <b>Largo, FL 33771</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Rodney Blythe</b> <b>1100 S. Belcher Rd. #438</b> <b>Largo, FL 33771</b>

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: *Robert J. Dinan* **ROBERT DINAN** **2/22/02** **787-536-2705**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)