.2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

STEVE BLASON
SIGNATURE AND TYPED OR PRINTED NAME OF BIONING OFFICER OR DIRECTOR

Apr 10, 2006 8:00 am Secretary of State DOCUMENT # N00000000286 04-10-2006 90314 029 ****61.25 1. Entity Name FAIRWAYS AT IMPERIAL LAKEWOODS PHASE 1A-1 HOMEOWNERS' ASSOCIATION, INC. 60025096 Principal Place of Business Mailing Address 3900 W. KENNEDY BLVD. 3900 W. KENNEDY BLVD. TAMPA, FL 33609 TAMPA, FL 33609 2. Principal Place of Business 3. Mailing Address 13575 58th Street NOKTH 13575 56th STREET NORTH Suite, Apt. #, etc. Suite, Apt. #, etc. 03062006 Chg-NP CR2E037 (11/05) swite 148 Suite 148 City & State City & State Applied For 4. FEI Number Įι CLEARWATER FL 02-0677002 CLEARWATER Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33760 WSA 33 7<u>60</u> ИŚА Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROLAND, DOUGLAS C BRICKLEMYER, SMOLKER; & BOLVES, P.A. 500 E. KENNEDY BLVD., SUITE 200 Street Address (P.O. Box Number is Not Acceptable) TAMPA, FL 33602 City 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 ze ano AGENT SIGNATURE (NOTE: Registered Agent signature required when reinstating) Filling Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Due by May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PΠ TITLE Y Delete TITLE ☐ Change **Addition** SELLINGER, JOHN BENSON, STEVE NAME NAME SSI N. CATTLEMEN ROAD, SUITE 300 STREET ADDRESS **438 INTERSTATE COURT** STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34240 SARASOTA, FL 34232 CITY-ST-ZIP VPD TITLE Delete TITLE ☐ Change KEMPER CHRIS SSI N. CATILEMEN ROAD, SNIK 300 WEISSER, RON NAME NAME 3900 W. KENNEDY BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **TAMPA, FL 33609** SARASITA, FL CITY-ST-7IP 34232 TITLE SD Delete TITLE ☐ Change Addition WEISSER, RON NAME NAME STREET ADDRESS 3900 W. KENNEDY BLVD. STREET ADDRESS CITY-ST-ZIP **TAMPA, FL 33609** CITY-ST-7IP TD TITLE Delete TITLE ☐ Change ☐ Addition NAME MUIR, MACHELLE NAME STREET ADDRESS 3900 W. KENNEDY BLVD. STREET ADDRESS CITY-ST-7IP TAMPA, FL 33609 CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is free 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 employeered 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 employeered. with all other like empowered.

FILED

941-371-7794

Daytime Phone #