

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90360 016 *****61.25

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1. Entity Name
FAIRBOURNE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
2020 CLUBHOUSE DRIVE
SUN CITY CENTER, FL 33573

Mailing Address
2020 CLUBHOUSE DRIVE
SUN CITY CENTER, FL 33573

2. Principal Place of Business

3. Mailing Address



Suite, Apt. #, etc. *****New Address*****

City & State
1701-B Rickenbacker Drive
Sun City Center, FL 33573

Zip

03292004 Chg-NP CR2E037 (10/03)

4. FEI Number
42-1537180

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HASTINGS, VIVIEN N
24301 WALDEN CENTER DRIVE SUITE 300
BONITA SPRINGS, FL 34134

7. Name and Address of New Registered Agent

Name
Street Address James R. Defurio, Esquire
101 E. Kennedy Blvd. Suite 3000
City Tampa, FL 33602
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 the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	☒ Delete
NAME	BEYER, R.C. JR	
STREET ADDRESS	2020 CLUBHOUSE DRIVE	
CITY-ST-ZIP	SUN CITY CENTER, FL 33573	
TITLE	STD	☒ Delete
NAME	NELSON, GARY	
STREET ADDRESS	2020 CLUBHOUSE DRIVE	
CITY-ST-ZIP	SUN CITY CENTER, FL 33573	
TITLE	VD	☒ Delete
NAME	SCHLICHTING, SANDRA	
STREET ADDRESS	1207 FAIRWAY GREENS DRIVE	
CITY-ST-ZIP	SUN CITY CENTER, FL 33573	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Change ☒ Addition
NAME	Spafford, Robert	
STREET ADDRESS	1237 Fairway Greens Dr.	
CITY-ST-ZIP	Sun City Center, FL 33573	
TITLE	VPD	☐ Change ☒ Addition
NAME	Maslyk, Linda	
STREET ADDRESS	1318 Fairway Greens Dr.	
CITY-ST-ZIP	Sun City Center, FL 33573	
TITLE	TD	☐ Change ☒ Addition
NAME	Gannon, Richard	
STREET ADDRESS	1229 Fairway Greens Dr.	
CITY-ST-ZIP	Sun City Center, FL 33573	
TITLE	SD	☐ Change ☒ Addition
NAME	Mettam, Frank	
STREET ADDRESS	1242 Fairway Greens Dr.	
CITY-ST-ZIP	Sun City Center, FL 33573	
TITLE	D	☐ Change ☒ Addition
NAME	Schlichting, Sandi	
STREET ADDRESS	1207 Fairway Greens Dr.	
CITY-ST-ZIP	Sun City Center, FL 33573	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-04

Date

Daytime Phone #