

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90044 033 ****61.25

DOCUMENT # N34495

1. Entity Name
FAIRFAX CONDOMINIUM I ASSOCIATION, INC.



Principal Place of Business
**C/O MWI PROPERTY MANAGEMENT
4373 ROCK ISLAND RD
LAUDERHILL, FL 33319 US**

Mailing Address
**C/O MWI PROPERTY MANAGEMENT
4373 ROCK ISLAND RD
LAUDERHILL, FL 33319 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01262006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
65-0226176

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

**JEFFERBAUM, HARVEY
4373 ROCK ISLAND RD.
LAUDERHILL, FL 33319**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 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, 2006**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
SCHWARTZ, HERBERT
7646 FAIRFAX DR
TAMARAC, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
HISCHBEIN, JACK
7658 FAIRFAX DRIVE
TAMARAC, FL 33321 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Ralph Baer
7644 FAIRFAX DR
TAMARAC, FL 33321 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1VP
REISNER, STANLEY
7660 FAIRFAX DR
TAMARAC, FL 33321 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Burton Scholl
7632 FAIRFAX DR
TAMARAC, FL 33321 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
KATZ, TED
7656 FAIRFAX DR
TAMARAC, FL 33321 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
Alfred Katz
7656 FAIRFAX DR
TAMARAC, FL 33321 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2VP
JEFFERBAUM, HARVEY
7642 FAIRFAX DR
TAMARAC, FL 33321 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 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: *Herbert Schwartz* **Herbert Schwartz** 2/7/06 954-721-9781
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #