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Feb 05 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N36887** (0)

1. Corporation Name

**FAIRWAYS AT ROLLING HILLS HOMEOWNERS ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

5023 CR 125  
WILDWOOD FL 34785

5023 CR 125  
WILDWOOD FL 34785

3. Date Incorporated or Qualified

02/28/1990

4. FEI Number

59-2995391

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 8524 NE 136<sup>th</sup> AVE

26 8524 NE 136<sup>th</sup> AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 LADY LAKE FL

28 LADY LAKE FL

Zip Country

Zip Country

24 32159

25 LAKE

29 32159

30 LADY LAKE

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROWN, RONALD D  
5023 CR 125  
WILDWOOD FL 34785

81 Name

RONALD D. BROWN

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

8524 NE 136<sup>th</sup> AVE

83

84 City

LADY LAKE

FL

85 Zip Code

32159

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*Ronald D. Brown*

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

(NOTE: Registered Agent signature required when reinstating)

1/23/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME PD  
STREET ADDRESS BROWN, RONALD D.  
CITY-ST-ZIP 5023 CR 125  
WILDWOOD FL 34785

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☒ DELETE  
NAME VD  
STREET ADDRESS HEWITT, HOWARD  
CITY-ST-ZIP 5023 CR 125  
WILDWOOD FL 34785

2.1 TITLE VD ☒ Change ☒ Addition  
2.2 NAME  
2.3 STREET ADDRESS MICKEY A HOPKINS  
2.4 CITY-ST-ZIP 34218 WASHINGTON ST  
LEESBURG FL 34788

TITLE ☐ DELETE  
NAME STD  
STREET ADDRESS FOX, GREGORY  
CITY-ST-ZIP 5023 CR 125  
WILDWOOD FL 34785

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Ronald D. Brown*

1/23/98 352-750-4240

CR2E037 (10/97)