

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2001 8:00 am
Secretary of State

03-26-2001 90025 042 ****61.25

DOCUMENT # N42800

1. Entity Name

FAIRVIEW OF ATLANTIS HOMEOWNERS ASSOCIATION, INC

Principal Place of Business

**189 ORANGE TREE DR
 ATLANTIS FL 33462**

Mailing Address

**145 ATLANTIS BLVD
 PH4
 ATLANTIS FL 33462**

2. Principal Place of Business

3. Mailing Address

193 Orange Tree Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Atlanta FL

4. FEI Number

65-0262243

Applied For

Not Applicable

Zip

Country

Zip

Country

33462

USA

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

**WAGNER, SUSAN
 145 ATLANTIS BLVD
 PH4
 ATLANTIS FL 33462**

Name

Wagner, Susan

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

193 Orange Tree Drive

City

Atlanta

FL

Zip Code

33462

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

Susan Wagner Susan Wagner

3-23-01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

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

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BILLIES, DICKSON 189 ORANGE TREE DR. ATLANTIS FL 33462	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KINGS, TED 177 ORANGE TREE DR ATLANTIS FL 33462	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WAGNER, SUSAN 145 ATLANTIS BLVD PH4 ATLANTIS FL 33462	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CHISHOLM, GEORGE 197 ORANGE TREE DR ATLANTIS FL 33462	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Wagner, Susan 193 Orange Tree Drive Atlanta, FL 33462	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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 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:

Susan Wagner Susan Wagner

3-23-01

561-966-2051

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)