

2002 UNIFORM BUSINESS REPORT (UBR)

4/1

FILED
May 28, 2002 8:00 am
Secretary of State

04-01-2002 90054 030 ****61.25

DOCUMENT # N93000004491

1. Entity Name

FAIRWAY HILLS HOMEOWNERS ASSOCIATION, INC.

(NC) LW

80151

Principal Place of Business

Mailing Address

THE THORNTON COMPANY
5695 BEGGS ROAD STE B-100
ORLANDO FL 32810

5695 BEGGS RD
STE. B-100
ORLANDO FL 32810
US

2. Principal Place of Business

225 S. WESTMONTA DR.
 Suite, Apt. #, etc.
2050

3. Mailing Address

P.O. Box 161606
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Altamonte Springs, FL

City & State

Altamonte Springs, FL

4. FEI Number

59-3207904

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Zip

32714

Country

USA

Zip

32716-1606

Country

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THORNTON, HARKLEY R ESQ.
5695 BEGGS RD.
STE B-100
ORLANDO FL

Name **Ellen Womack**

Street Address (P.O. Box Number is Not Acceptable)
225 S. Westmonta Dr.
Suite 2050

City **Altamonte Springs FL**

Zip Code **32714**

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 Ellen R. Womack, Ellen R. Womack 3/22/02
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

TITLE	P	QUIRK, WILLIAM T	<input checked="" type="checkbox"/> Delete
NAME		413 FENWICK CT.	
STREET ADDRESS		DEBARY FL 32713	
CITY-ST-ZIP			
TITLE	TD	CUMMINGS, LELAND	<input checked="" type="checkbox"/> Delete
NAME		338 FERNHILL DR.	
STREET ADDRESS		DEBARY FL 32713	
CITY-ST-ZIP			
TITLE	VD	FONT, BILL	<input type="checkbox"/> Delete
NAME		397 FENWICK COURT.	
STREET ADDRESS		DEBARY FL 32713	
CITY-ST-ZIP			
TITLE	SD	FORREST, PATRICIA	<input type="checkbox"/> Delete
NAME		459 FOXHILL DRIVE	
STREET ADDRESS		DEBARY FL 32713	
CITY-ST-ZIP			
TITLE	D	RAPE, JOHN	<input checked="" type="checkbox"/> Delete
NAME		409 FENWICK CT.	
STREET ADDRESS		DEBARY FL 32713	
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	Overton, Wayne	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		324 Fernhill Dr.	
STREET ADDRESS		Debary, FL 32713	
CITY-ST-ZIP			
TITLE	DT	Cook, Brett Gilbert	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		300 Fernhill Dr	
STREET ADDRESS		Debary, FL 32713	
CITY-ST-ZIP			
TITLE	D	Brett, Bill	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		481 Foxhill Dr.	
STREET ADDRESS		Debary, FL 32713	
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> 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)(f), 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: Brett Gilbert E. Cook 3-22-02 386-774-5801
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)