


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90178 036 ****61.25

DOCUMENT # N94000003525

1. Entity Name
FAIRWAYS & GREENS CONDOMINIUM ASSOCIATION INC.



Principal Place of Business Mailing Address

3300-3360 BENEVA ROAD #100 SARASOTA FL 34232 **3300-3360 BENEVA ROAD #100 SARASOTA FL 34232**

2. Principal Place of Business 3. Mailing Address

Fairways & Greens Condominium Association, Inc. 3300-3360 Beneva Road, #100 Sarasota, FL 34232 **Fairways & Greens Condominium Association, Inc. 3300-3360 Beneva Road, #100 Sarasota, FL 34232**



1st MOORE CR2E037 (10/04)

Zip Country Zip Country

4. FEI Number Applied For

65-0520202 Not Applicable

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

6. Name and Address of Current Registered Agent

**PETERSEN, PETER
 3360 BENEVA ROAD
 APT 123
 SARASOTA FL 34232**

7. Name and Address of New Registered Agent

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: *Peter Petersen* **4-19-2005**

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
 Due By May 1, 2005**

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	<input type="checkbox"/> Delete
NAME	PETERSEN, PETER A	
STREET ADDRESS	3360 BENEVA RD. #123	
CITY-ST-ZIP	SARASOTA FL 34232	
TITLE	D	<input type="checkbox"/> Delete
NAME	DAVIES, JOEL	
STREET ADDRESS	3360 BENEVA RD #113	
CITY-ST-ZIP	SARASOTA FL 34232	
TITLE	D	<input type="checkbox"/> Delete
NAME	MERTENS, HELEN	
STREET ADDRESS	3360 BENEVA RD #131	
CITY-ST-ZIP	SARASOTA FL 34232	
TITLE	D	<input type="checkbox"/> Delete
NAME	BARTELL, JOHN	
STREET ADDRESS	3360 BENEVA RD #134	
CITY-ST-ZIP	SARASOTA FL 34232	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D/ BOOK KEEPER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOAN BARTELL	
STREET ADDRESS	3360 BENEVA RD. #134	
CITY-ST-ZIP	SARASOTA, FL. 34232.	
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)(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: *Peter Petersen* **4-19-2005** **(941) 923-6157**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #