


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

04-23-2007 90079 025 \*\*\*\*70.00

<b>DOCUMENT # N94000003525</b> 1. Entity Name <b>FAIRWAYS &amp; GREENS CONDOMINIUM ASSOCIATION INC.</b>			
Principal Place of Business 3300-3360 BENEVA ROAD #100 SARASOTA FL 34232		Mailing Address 3300-3360 BENEVA ROAD #100 SARASOTA FL 34232	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
<b>6. Name and Address of Current Registered Agent</b>  PETERSEN, PETER 3360 BENEVA ROAD APT 123 SARASOTA FL 34232		<b>7. Name and Address of New Registered Agent</b> Name <u>MR. PETER PETERSEN</u> Street Address (P.O. Box Number is Not Acceptable) <u>3360 BENEVA ROAD, APT. 123</u> City <u>SARASOTA</u> FL Zip Code <u>34232</u>	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			



1st MOORE CR2E037 (10/06)

4. FEI Number <b>65-0520202</b>	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD PETERSEN, PETER A 3360 BENEVA RD. #123 SARASOTA FL 34232		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		
TITLE	D DAVIES, JOEL 3360 BENEVA RD #113 SARASOTA FL 34232		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		
TITLE	D MERTENS, HELEN 3360 BENEVA RD #131 SARASOTA FL 34232		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		
TITLE	D BARTELL, JOHN 3360 BENEVA RD #134 SARASOTA FL 34232		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		
TITLE	DB BARTELL, JOAN 3360 BENEVA RD E#134 SARASOTA FL 34232		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:** Peter Petersen APR-11-07 (941) 923-6157

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