

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003525

FILED
May 01, 2009
Secretary of State

Entity Name: FAIRWAYS & GREENS CONDOMINIUM ASSOCIATION INC.

Current Principal Place of Business:

3300-3360 BENEVA ROAD
#100
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

3300-3360 BENEVA ROAD
#100
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 65-0520202 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PETERSON, PETER
3360 BENEVA ROAD
APT 123
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PETERSEN, PETER A
Address: 3360 BENEVA RD. #123
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: DAVIES, JOEL
Address: 3360 BENEVA RD #113
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: MERTENS, HELEN
Address: 3360 BENEVA RD #131
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: BARTELL, JOHN
Address: 3360 BENEVA RD #134
City-St-Zip: SARASOTA, FL 34232

Title: DB () Delete
Name: BARTELL, JOAN
Address: 3360 BENEVA RD E#134
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER PETERSEN

P

05/01/2009

Electronic Signature of Signing Officer or Director

_____ Date