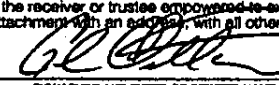


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2005 8:00 am
Secretary of State

02-07-2005 90093 048 ****61.25

DOCUMENT # N04000003054					
1. Entity Name FAIRMONT HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 1230 N. HARBOR CITY BLVD. MELBOURNE, FL 32935			Mailing Address 1230 N. HARBOR CITY BLVD. MELBOURNE, FL 32935		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	01122005 Chg-NP CR2E037 (10/03) 4. FEI Number 80-0117688 Applied For ☐ Not Applicable ☐	
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	
OUTLAW, D. GLEN 1230 N. HARBOR CITY BLVD. MELBOURNE, FL 32935				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 _____ (NOTE: Registered Agent signature required when releasing) Signature, typed or printed name of registered agent and title if applicable. DATE _____					
Filing Fee is \$81.25 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				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D OUTLAW, D. GLEN ☐ Delete			TITLE	☐ Change ☐ Addition
NAME	OUTLAW, D. GLEN			NAME	
STREET ADDRESS	1230 N. HARBOR CITY BLVD.			STREET ADDRESS	
CITY - ST - ZIP	MELBOURNE, FL 32935			CITY - ST - ZIP	
TITLE	D OUTLAW, BEVILLE S ☐ Delete			TITLE	☐ Change ☐ Addition
NAME	OUTLAW, BEVILLE S			NAME	
STREET ADDRESS	1222 S. HARBOR CITY BLVD.			STREET ADDRESS	
CITY - ST - ZIP	MELBOURNE, FL 32935			CITY - ST - ZIP	
TITLE	D OUTLAW, MYLA ☐ Delete			TITLE	☐ Change ☐ Addition
NAME	OUTLAW, MYLA			NAME	
STREET ADDRESS	1222 S. HARBOR CITY BLVD.			STREET ADDRESS	
CITY - ST - ZIP	MELBOURNE, FL 32935			CITY - ST - ZIP	
TITLE	☐ Delete			TITLE	☐ Change ☐ Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE	☐ Delete			TITLE	☐ Change ☐ Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE	☐ Delete			TITLE	☐ Change ☐ Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				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: 		D. Glen Outlaw		2/2/05 (321)254-9721	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	