

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25579

FILED
Mar 29, 2005
Secretary of State

Entity Name: FAIRWAY COVE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Mailing Address:

FEI Number: 59-2898719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT, INC.
2180 W. SR 434, SUITE 5000
LONGWOOD, FL 32779 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: MATTHEWS, SUZANNE
Address: 6613 CRENSHAW DR
City-St-Zip: ORLANDO, FL 32835

Title: VPD () Delete
Name: LYNCH, HELEN
Address: 6601 CRISTINA MARIE DR
City-St-Zip: ORLANDO, FL 32835

Title: VPD () Delete
Name: BEHRLE, RICH
Address: 6656 CRENSHAW DR
City-St-Zip: ORLANDO, FL 32835

Title: SD () Delete
Name: REICHARD, SUE A
Address: 6600 CRISTINA MARIE DR
City-St-Zip: ORLANDO, FL 32835

Title: TD (X) Delete
Name: JOHNSTON, MARK
Address: 1133 MISSION RIDGE CT
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LYNCH, HELEN
Address: 6601 CRISTINA MARIE DR
City-St-Zip: ORLANDO, FL 32835

Title: VPD (X) Change () Addition
Name: REICHARD, SUE A
Address: 6600 CRISTINA MARIE DR
City-St-Zip: ORLANDO, FL 32835

Title: SD (X) Change () Addition
Name: NUCKOLS, TERRY
Address: 6601 FAIRWAY COVE DR
City-St-Zip: ORLANDO, FL 32835

Title: TD (X) Change () Addition
Name: CURTIS, SUSAN
Address: 6607 CRISTINA MARIE DR
City-St-Zip: ORLANDO, FL 32835

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: HELEN LYNCH

PD

03/29/2005

Electronic Signature of Signing Officer or Director

Date