2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01204

FILED Apr 21, 2005 Secretary of State

Entity Name: FAIRWOODS CONDOMINIUM ASSOCIATION INC

	17411000	5B0 0014B014114101417 10000	, (1101 4 , 11 4 0.		
Current Principal Place of Business:			New Prince	New Principal Place of Business:	
P.O. BOX (LAKELANI	6253 D, FL 3380732	53			
Current M	ailing Addres	s:	New Maili	ing Address:	
P.O. BOX (LAKELANI	6253 D, FL 3380732	53			
FEI Number: 65-0002729 FEI Number Applied For ()		FEI Number Not Applicable () Certificate of Status Desired ()			
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
5925 IMPE MULBERR The above	RIAL PKWY #1 YY, FL 33860	US	ourpose of changing i	its registered office or registered agent, or b	ooth,
SIGNATUF		ic Signature of Registered Ag	ont	Data	
				Date	
Title: Name: Address: City-St-Zip:	PD () DANIELS, F. DII 6006 TROPHER MULBERRY, FL	Delete LLON TRAIL	Title: Name: Address: City-St-Zip:	NS/CHANGES TO OFFICERS AND DIREC () Change () Addition	TORS
Title: Name: Address: City-St-Zip:	STD () WATKINS, DEN 6238 HATCHER LAKELAND, FL	RD	Title: Name: Address: City-St-Zip:	D (X) Change () Addition O'HEARN, JAMES 115 COUNTRY CLUB RD. MULBERRY, FL 33860	
Title: Name: Address: City-St-Zip:	VPD () BAUDENDISTEI 6093 TOPHER T MULBERRY, FL	FRAIL	Title: Name: Address: City-St-Zip:	STD (X) Change () Addition BAUDENDISTEL, WILLIAM H 6093 TOPHER TRAIL MULBERRY, FL 33860	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	VPD () Change (X) Addition PLEMMONS, CHAD 6095 TOPHER TRAIL MULBERRY, FL 33860	

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: KENNETH W. SMITH MGR 04/21/2005