## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01204

FILED Apr 24, 2007 Secretary of State

Entity Name: FAIRWOODS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 6253 TOPHER TRAIL

LAKELAND, FL 338076253 MULBERRY, FL 33860

Current Mailing Address: New Mailing Address:

P.O. BOX 6253

LAKELAND, FL 338076253

FEI Number: 65-0002729 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AUGUST IMPERIAL MANAGEMENT, INC. 5950 IMPERIALAKES BLVD. MULBERRY, FL 33860 US

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: VD (X) Change () Addition Name: DANIELS, F. DILLON Name: DANIELS, F. DILLON Address: 6006 TROPHER TRAIL Address: 6006 TROPHER TRAIL

Address: 6006 TROPHER TRAIL
City-St-Zip: MULBERRY, FL 33860

Address: 6006 TROPHER TRAIL
City-St-Zip: MULBERRY, FL 33860

MULBERRY, FL 33860

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: O'HEARN, JAMES Name: BASKIN, DARCY

Address: 115 COUNTRY CLUB RD. Address: 828 POLFUS DR..
City-St-Zip: MULBERRY, FL 33860 City-St-Zip: BENTON HARBOR, MI 49022

Title: STD ( ) Delete Title: SD (X) Change ( ) Addition Name: BAUDENDISTEL, WILLIAM H Name: BAUDENDISTEL, WILLIAM H

 Address:
 6093 TOPHER TRAIL
 Address:
 6093 TOPHER TRAIL

 City-St-Zip:
 MULBERRY, FL 33860
 City-St-Zip:
 MULBERRY, FL 33860

Title: VPD ( ) Delete Title: TD (X) Change ( ) Addition

 Name:
 PLEMONS, CHAD
 Name:
 JULIUS, LEEANNE

 Address:
 6095 TOPHER TRAIL
 Address:
 6116 TOPHER TRAIL

 City-St-Zip:
 MULBERRY, FL 33860
 City-St-Zip:
 MULBERRY, FL 33860

I hereby certify that the information supplied with this filing does not qualify for the 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: KENNETH W.SMITH MGR 04/24/2007