2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11239

FILED Apr 14, 2009 Secretary of State

Entity Name: FAIRWAY BAY III ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2477 STICKNEY POINT RD. STE. 118 A SARASOTA, FL 34231 **New Mailing Address: Current Mailing Address:** 2477 STICKNEY POINT RD. STE. 118 A SARASOTA, FL 34231 US FEI Number: 65-0024352 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: ARGUS PROPERTY MANAGEMENT, INC. 2477 STICKNEY POINT DR SUITE 118A SARASOTA, FL 34231 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: (X) Change () Addition () Delete MCFARLAND, HANK MCKARLAND, HANK Name: Name: 2120 HARBOURSIDE DR #637 Address: 2120 HARBOURSIDE DR #637 Address: City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: LONGBOAT KEY, FL 34228 Title: () Delete Title: () Change () Addition MAZUR, LEONARD Name: Name: Address: 2110 HARBORSIDE #513 Address: City-St-Zip: LONGBOAT KEY, FL 34428 City-St-Zip: Title: () Delete Title: () Change () Addition WALKER, CHERYL Name: Name: 2120 HARBOURSIDE DR. #645 Address: Address: City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: Title: () Delete Title: () Change () Addition Name: DIERKS, JAMES Name: 2120 HARBOURSIDE DRIVE # 614 Address: Address: City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: Title: () Delete Title: () Change () Addition DOSTER, JOHN Name: Name: 2110 HARBOURSIDE DRIVE # 557 Address: Address: City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: Title: () Delete Title: (X) Change () Addition HORWITZ, MARLENE ABRAHAMS, CATHA Name: Name: Address: 2120 HARBOURSIDE DR Address: 2120 HARBOURSIDE DR #626 LONGBOAT KEY, FL 34228 LONGBOAT KEY, FL 34228 City-St-Zip: 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: JAMES DIERKS P 04/14/2009