

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 10, 2003 8:00 am**  
**Secretary of State**

04-10-2003 90143 035 \*\*\*\*\*61.25

**DOCUMENT # 745178**

1. Entity Name

**FAIRWAY PARK CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

**5995 BANNOCK TERRACE  
BOYNTON BEACH FL 33437**

Mailing Address

**5995 BANNOCK TERRACE  
BOYNTON BEACH FL 33437**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2029736**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JOE BARTLETT, PRES. CRYSTAL COMM MGMT INC  
5995 BANNOCK TERRACE  
BOYNTON BEACH FL 33437**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

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 NAME STREET ADDRESS CITY-ST-ZIP	<b>TD LOPEZ, MAURICE</b> <input checked="" type="checkbox"/> Delete <b>5500 FAIRWAY PARK DR BOYNTON BCH FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD GELLES, ARNOLD</b> <input type="checkbox"/> Delete <b>5519 FAIRWAY PARK DRIVE BOYNTON BCH FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD LYNCH, JONATHAN</b> <input checked="" type="checkbox"/> Delete <b>5715 FAIRWAY PARK DRIVE BOYNTON BCH FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D KOMITOR, ELLIOT</b> <input type="checkbox"/> Delete <b>5600 FAIRWAY PARK DRIVE BOYNTON BCH FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D SIEGEL, DANIEL</b> <input type="checkbox"/> Delete <b>5640 FAIRWAY PARK DR. BOYNTON BEACH FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VTD MAHL, FRED</b> <input type="checkbox"/> Delete <b>5603 FAIRWAY PARK DRIVE BOYNTON BEACH FL</b>

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Assistant Sec'y Fran Simmons</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>5575 Fairway Park Drive Boynton BEach, FL 33437</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Director Norma Glasser</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>5617 Fairway Park Drive Boynton Beach, FL 33437</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Director AL Goldner</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>5660 Fairway Park Drive BOYNTON BEACH, FL 33437</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Director Norman Lorintz</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>5690 Fairway Park Drive Boynton BEach, FL 33437</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

**SIGNATURE REQUIRED**

**3/20/03**

CR2E037 (10/02)