

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712942

**Entity Name:** THE FAIRWAYS SOUTH, INC.**Current Principal Place of Business:**200 N E 14 AVE  
HALLANDALE BEACH, FL 33009**Current Mailing Address:**200 N E 14 AVE  
HALLANDALE BEACH, FL 33009 US**FEI Number:** 59-1236701**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAPALME, MICHEL PRES  
300 NE 14TH AVENUE  
#301  
HALLANDALE BEACH, FL 33009 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

**Officer/Director Detail :**

Title PRES  
Name LAPALME, MICHEL  
Address 300 NE 14TH AVE  
APT 301  
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR  
Name GABIAS, MAURICE  
Address 300 NE 14TH AVE  
APT 510  
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR  
Name ODENWELDER, KENT  
Address 300 NE 14TH AVENUE  
APT 302  
City-State-Zip: HALLANDALE BEACH FL 33009

Title TREASURER  
Name PAQUET, HELENE  
Address 200 NE 14TH AVE  
125  
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR  
Name BOUTILLETTE, NORMAN  
Address 300 NE 14TH AVENUE  
APT 302  
City-State-Zip: HALLANDALE BEACH FL 33009

Title SECRETARY  
Name SILVERSTEIN, LISA  
Address 200 NE 14TH AVE  
APT 222  
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR  
Name LAPIERRE, ANDRE  
Address 200 NE 14TH AVENUE  
APT 418  
City-State-Zip: HALLANDALE BEACH FL 33009

I hereby 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 all other like empowered.

**SIGNATURE:** MICHEL LAPALME

PRESIDENT

02/19/2021

Electronic Signature of Signing Officer/Director Detail

Date