

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 745316

**FILED**  
**Jan 17, 2018**  
**Secretary of State**  
**CC2901839319**

**Entity Name:** SOUTH FAIRWAYS CONDOMINIUM, INC.

**Current Principal Place of Business:**

3124 FINSTERWALD DR  
TITUSVILLE, FL 32780

**Current Mailing Address:**

PO BOX 814  
TITUSVILLE, FL 32781 US

**FEI Number:** 59-2873645

**Certificate of Status Desired:** No

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

PAYNE, ELEANOR R  
3124 FINSTERWALD DR  
TITUSVILLE, FL 32780 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:** ELEANOR R PAYNE

01/17/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name PAYNE, ELEANOR R.  
Address 3124 FINSTERWALD DR.  
City-State-Zip: TITUSVILLE FL

Title SECRETARY/TREASURER  
Name GAGLIARDI, DENNIS  
Address 3088 FINSTERWALD DR  
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR  
Name SPEER, GREGORY  
Address 3108 FINSTERWALD DR  
City-State-Zip: TITUSVILLE FL 32780

Title D  
Name MUNROE, JAYNE  
Address 3120 FINSTERWALD DR  
City-State-Zip: TITUSVILLE FL 32780

Title ASST. TREASURER  
Name SMITH, GAIL  
Address 523 TWIN LAKES DRD  
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR  
Name TOWARD, RICHARD GEORGE  
Address 3112 FINSTERWALD  
City-State-Zip: TITUSVILLE FL 32780

*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:** DENNIS GAGLIARDI

SECRETARY/TREASURER 01/17/2018

Electronic Signature of Signing Officer/Director Detail

Date