

**2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# 757000

Entity Name: FAIRWAYS AT BONAVENTURE CONDOMINIUM ASSOCIATION,
INC.

Current Principal Place of Business:

C/O T&G MANAGEMENT SERVICES, INC.
18001 OLD CUTLER ROAD, STE 476
PALMETTO BAY, FL 33157

Current Mailing Address:

C/O T&G MANAGEMENT SERVICES, INC.
18001 OLD CUTLER ROAD, STE 476
PALMETTO BAY, FL 33157 US

FEI Number: 59-2107197

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

T&G MANAGEMENT SERVICES, INC.
18001 OLD CUTLER ROAD, STE 476
PALMETTO BAY, FL 33157 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: T&G MANAGEMENT SERVICES

07/15/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SMITH, ELEANOR
Address 18001 OLD CUTLER ROAD, STE 476
City-State-Zip: PALMETTO BAY FL 33157

Title TREASURER
Name LORENZO, FRANK
Address 18001 OLD CUTLER ROAD, STE 476
City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR
Name EPPOLITO, VINCENT
Address 18001 OLD CUTLER ROAD, STE 476
City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR
Name PAGAN, MAX
Address 18001 OLD CUTLER ROAD, STE 476
City-State-Zip: PALMETTO BAY FL 33157

Title SECRETARY
Name CONSUEGRA, CARMENZA
Address 18001 OLD CUTLER ROAD, STE 476
City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR
Name LE MARIER, PATRICIA
Address 18001 OLD CUTLER ROAD, STE 476
City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR
Name CHARTERS, JOHN
Address 18001 OLD CUTLER ROAD, STE 476
City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR
Name PECORELLA, LORENZO
Address 18001 OLD CUTLER ROAD, STE 476
City-State-Zip: PALMETTO BAY FL 33157

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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: ELEANOR SMITH

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07/15/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	ZAVADIL, DANIEL
Address	18001 OLD CUTLER ROAD, STE 476
City-State-Zip:	PALMETTO BAY FL 33157