

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 760387

**Entity Name:** FAIRWAY BAY ASSOCIATION, INC.**Current Principal Place of Business:**2018 HARBOURSIDE DR.  
LONGBOAT KEY, FL 34228**Current Mailing Address:**2018 HARBOURSIDE DR.  
LONGBOAT KEY, FL 34228**FEI Number:** 59-2229320**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BENDER, BRIAN  
2018 HARBOURSIDE DR  
LONGBOAT KEY, FL 34228 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:** BRIAN BENDER

03/28/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name HARRISON, NAN  
Address 2018 HARBORSIDE DR  
City-State-Zip: LONGBOAT KEY FL 34228

Title SECRETARY  
Name MANGEL, SUZANNE  
Address 2018 HARBOURSIDE DR  
City-State-Zip: LONGBOAT KEY FL 34228

Title DIRECTOR  
Name LUCA, EUGENE  
Address 2018 HARBOURSIDE DR  
City-State-Zip: LONGBOAT KEY FL 34228

Title PRESIDENT  
Name KASTEN, JOHN  
Address 2018 HARBOURSIDE DR.  
City-State-Zip: LONGBOAT KEY FL 34228

Title TREASURER  
Name PORT, ALAN  
Address 2018 HARBOURSIDE DR.  
City-State-Zip: LONGBOAT KEY FL 34228

Title VP  
Name SULZMAN, FRANK  
Address 2018 HARBOURSIDE DR.  
City-State-Zip: LONGBOAT KEY FL 34228

Title DIRECTOR  
Name LIEBERMAN, PHILLIP  
Address 2018 HARBOURSIDE DR.  
City-State-Zip: LONGBOAT KEY FL 34228

*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:** JOHN KASTEN

PRESIDENT

03/28/2016

Electronic Signature of Signing Officer/Director Detail

Date