

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00976

**FILED**  
**Mar 31, 2014**  
**Secretary of State**  
**CC0411245051**

**Entity Name:** FAIRWAY BAY II 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: 59-2442043**

**Certificate of Status Desired: No**

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

JOHNSON, CHERI  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name KASDAN, PETER  
Address 2018 HARBOURSIDE DR  
City-State-Zip: LONGBOAT KEY FL 34228

Title T  
Name HAAS, FRED  
Address 2018 HARBOURSIDE DR  
City-State-Zip: LONGBOAT KEY FL 34228

Title AT  
Name BLANKMAN, PAUL  
Address 2018 HARBOURSIDE DR  
City-State-Zip: LONGBOAT KEY FL 34228

Title VP  
Name BERNSTEIN, MYRON  
Address 2018 HARBOURSIDE DR  
City-State-Zip: LONGBOAT KEY FL 34228

Title S  
Name PHILLIPS, BERNARD  
Address 2018 HARBOURSIDE DRIVE  
City-State-Zip: LONGBOAT KEY FL 34228

Title D  
Name BARBEE, JAMES  
Address 2018 HARBOURSIDE DRIVE  
City-State-Zip: LONGBOAT KEY FL 34228

Title DIRECTOR  
Name MAILLIARD, MIKE  
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: PETER KASDAN**

**PRESIDENT**

**03/31/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date