# 2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N07774

Entity Name: FAIRWAY WOODS CONDOMINIUM ASSOCIATION, INC.

FILED Sep 11, 2013 Secretary of State CC6622324313

## **Current Principal Place of Business:**

8586 POTTER PARK DR. SARASOTA, FL 34238

# **Current Mailing Address:**

8586 POTTER PARK DR.

ATTN: PRIORITY ONE PROPERTY MANAGEMENT

SARASOTA, FL 34238 US

FEI Number: 59-2518713 Certificate of Status Desired: No

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

PRIORITY ONE PROPERTY ONE INC. 8586 POTTER PARK DR. SARASOTA, FL 34238 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: MICHAEL CANACARI 09/11/2013

Electronic Signature of Registered Agent Date

## Officer/Director Detail:

 Title
 DIRECTOR
 Title
 DIRECTOR

 Name
 LEVINE, JUDITH
 Name
 ROSS, IRVING

Address 7724 FAIRWAY WOOD DR. Address 7686 FAIRWAY WOODS DR.

City-State-Zip: SARASOTA FL 34238 City-State-Zip: SARASOTA FL 34238

TitleTREASURER, DIRECTORTitlePRESIDENT, DIRECTORNameHIGBEE, JEANETTENameWEITZNER, ARTHUR

Address 7037 W. ELMHURST AVE Address 7666 FAIRWAY WOODS DR.

City-State-Zip: LITTLETON CO 80128 City-State-Zip: SARASOTA FL 34238

TitleVP, DIRECTORTitleDIRECTORNameSTEFAN, JAMESNameDELP, WILLIAM

Address 7635 FAIRWAY WOODS DR. Address 7674 FAIRWAY WOODS DR.

City-State-Zip: SARASOTA FL 34238 City-State-Zip: SARASOTA FL 34238

Title SECRETARY, DIRECTOR Title ASST. SECRETARY
Name COMER, MARIAN Name CANACARI, MICHAEL

Address 7560 FAIRWAY WOODS DR Address 8586 POTTER PARK DR.

Address 7560 FAIRWAY WOODS DR. Address 8586 POTTER PARK DR. ATTN: PRIORITY ONE PROPERTY

City-State-Zip: SARASOTA FL 34238 MANAGEMENT

City-State-Zip: SARASOTA FL 34238

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: MICHAEL CANACARI ASST. SECRETARY 09/11/2013