

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25579

Entity Name: FAIRWAY COVE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**932 N. MAITLAND AVE
STE A
MAITLAND, FL 32751**Current Mailing Address:**932 N. MAITLAND AVE
STE A
MAITLAND, FL 32751 US**FEI Number:** 59-2898719**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TOP NOTCH MANAGEMENT SERVICES
932 N. MAITLAND AVE
STE A
MAITLAND, FL 32751 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:** MARILYN VINCE

04/30/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name LYNCH, HELEN
Address 932 N. MAITLAND AVE
STE A
City-State-Zip: MAITLAND FL 32751

Title VP, DIRECTOR
Name KOSTANTINIDIS, JOANNE
Address 932 N. MAITLAND AVE
STE A
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name HAYS, JIM
Address 932 N. MAITLAND AVE
STE A
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR, SECRETARY
Name SWEENEY, TONI
Address 932 N. MAITLAND AVE
STE A
City-State-Zip: MAITLAND FL 32751

Title TREASURER
Name RICHARD, MICHELLE
Address 932 N. MAITLAND AVE
STE A
City-State-Zip: MAITLAND FL 32751

Title MANAGER
Name OTERO, ANA
Address 932 N. MAITLAND AVE
STE A
City-State-Zip: MAITLAND FL 32751

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: ANA OTERO

MANAGER

04/30/2019

Electronic Signature of Signing Officer/Director Detail

Date