

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H00340

**FILED  
Mar 08, 2021  
Secretary of State  
1389820549CC**

**Entity Name:** FAIRWAY VILLAGE RESIDENTS ASSOCIATION, INC.

**Current Principal Place of Business:**

1100 BELCHER ROAD S.  
OFFICE  
LARGO, FL 33771

**Current Mailing Address:**

1100 BELCHER ROAD S.  
OFFICE  
LARGO, FL 33771 US

**FEI Number:** 59-2454926

**Certificate of Status Desired:** No

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

FIORE, ANTHONY V  
1100 BELCHER ROAD S.  
OFFICE  
LARGO, FL 33771 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 DIRECTOR  
Name FORD, STEPHEN  
Address 1100 BELCHER ROAD S.  
OFFICE  
City-State-Zip: LARGO FL 33771

Title VP  
Name MARSH, ROXANA  
Address 1100 BELCHER ROAD S.  
OFFICE  
City-State-Zip: LARGO FL 33771

Title DIRECTOR  
Name WEAVER, CHARLES  
Address 1100 BELCHER ROAD S.  
OFFICE  
City-State-Zip: LARGO FL 33771

Title TREASURER  
Name RAYMER, DAVID  
Address 1100 BELCHER ROAD S.  
OFFICE  
City-State-Zip: LARGO FL 33771

Title PRESIDENT  
Name WILLIAMS, JOHN  
Address 1100 BELCHER ROAD S.  
OFFICE  
City-State-Zip: LARGO FL 33771

Title DIRECTOR  
Name FOISY, LYDIA  
Address 1100 BELCHER ROAD S.  
OFFICE  
City-State-Zip: LARGO FL 33771

Title DIRECTOR  
Name BURNS, DARRYL  
Address 1100 BELCHER ROAD S.  
OFFICE  
City-State-Zip: LARGO FL 33771

Title SECRETARY  
Name KILLAM, JUNE  
Address 1100 BELCHER ROAD S.  
OFFICE  
City-State-Zip: LARGO FL 33771

**Continues on page 2**

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANTHONY V. FIORE

**GENERAL MANAGER**

**03/08/2021**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            SWAIN, DARRELL  
Address        1100 BELCHER RD. S.  
                  OFFICE  
City-State-Zip: LARGO FL 33771