


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2007 8:00 am
Secretary of State

02-19-2007 90056 038 ****61.25

DOCUMENT # 715082

1. Entity Name
FAIRFAX HALL CONDOMINIUM CORP., INC.



Principal Place of Business
LAUDERHILL TEN MGMT. CORP.
4301 NW 16 ST.
LAUDERHILL, FL 33313 US

Mailing Address
LAUDERHILL TEN MGMT. CORP.
4301 NW 16 ST.
LAUDERHILL, FL 33313 US

2. Principal Place of Business - No P.O. Box #
4411 N.W. 16th ST

3. Mailing Address
 Suite, Apt. #, etc.

City & State
LAUDERHILL, FL

City & State
 Suite, Apt. #, etc.

Zip
33313

Country
US

01112007 Chg-NP CR2E037 (12/06)



6. Name and Address of Current Registered Agent

MINKLEY, AUDREY
4301 N.W. 16TH ST.
LAUDERHILL, FL 33313

4. FEI Number
59-1320167

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROUSSELLE, ANDRE' 4411 NW 16TH STE F210 LAUDERHILL, FL 33313 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COTE, JEAN GUY 4411 NW 16TH STE F101 LAUDERHILL, FL 33313 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FAUCHERS, JC 4411 NW 16TH STE F307 LAUDERHILL, FL 33313 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MOISAN, MICHEL 4411 NW 16TH ST F-106 LAUDERHILL, FL 33313 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLERMONT, JEAN 4411 NW 16TH STE F206 LAUDERHILL, FL 33313 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LAFONTAINE, M 4411 NW 16TH ST., # F-302 LAUDERHILL, FL 33313 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERNIER, C 4411 NW 16TH ST., # F-111 LAUDERHILL, FL 33313 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **02-12-07 954-733-1922** Date Daytime Phone #