2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#719055

FILED Apr 27, 2005 Secretary of State

Entity Name: FAIRWAYS RIVIERA ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 250 DIPLOMAT PARKWAY HALLANDALE, FL 33009 **Current Mailing Address: New Mailing Address:** 250 DIPLOMAT PARKWAY HALLANDALE, FL 33009 FEI Number: 59-1288193 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WOLINER, LISA ANNE BECKER & POLIAKOFF 3111 STIRLING ROAD 3111 STIRLING ROAD FT. LAUDERDALE, FL 33312 US US FT. LAUDERDALE, FL 33312 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: RUBENSTEIN 04/27/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CONNERY, ELYSE Name: Name: 200 DIPLOMAT PKWY., #826 Address: Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: Title: () Delete Title: () Change () Addition Name: FIELDS, YVETTE Name: Address: 250 DIPLOMAT PARKWAY, #416 Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: Title: VD. () Delete Title: (X) Change () Addition LIPOFF, BURT Name: CUNNINGHAM, AL Name: 300 DIPLOMAT PKWY., #310 300 DIPLOMAT PKWY. Address: Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: HALLANDALE, FL 33009 Title: TD () Delete Title: () Change () Addition WEINERMAN, LOWELL Name: Name: Address: 200 DIPLOMAT PKWY., #631 Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ELYSE CONNERY PD 04/27/2005