

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719056

FILED
Jan 25, 2010
Secretary of State

Entity Name: FAIRWAYS RIVIERA NORTH ASSOCIATION, INC.

Current Principal Place of Business:

400 DIPLOMAT PARKWAY
HALLANDALE, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

400 DIPLOMAT PKWY
HALLANDALE, FL 33009

New Mailing Address:

400 DIPLOMAT PKWY
#408
HALLANDALE, FL 33009

FEI Number: 59-1314609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OPPER, LEON
400 DIPLOMAT PARKWAY
403
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: FORD, CATHY
Address: 400 DIPLOMAT PKWY
City-St-Zip: HALLANDALE, FL 33009

Title: S
Name: GORDON, GORDON B
Address: 400 DIPLOMAT PKWY
City-St-Zip: HALLANDALE, FL 33009

Title: PD
Name: OPFER, LEON
Address: 400 DIPLOMAT PKWY
City-St-Zip: HALLANDALE, FL 33009

Title: VPD
Name: SCHNEE, NORMAN
Address: 400 DIPLOMAT PKWY
City-St-Zip: HALLANDALE, FL 33009

Title: TD
Name: KRASNOW, GAIL
Address: 400 DIPLOMAT PKWY
City-St-Zip: HALLANDALE, FL 33009

Title: D
Name: SERWATKA, STAN
Address: 400 DIPLOMAT PKWY
City-St-Zip: HALLANDALE, FL 33009

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: GAIL KRASNOW

TD

01/25/2010

Electronic Signature of Signing Officer or Director

Date