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Jul 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **721465** (3)

1. Corporation Name

FAIRWAY OAKS CONDOMINIUM, INC.

Principal Place of Business

Mailing Address

**245 AMHERST AVE.
SARASOTA FL 34232**

**245 AMHERST AVE.
SARASOTA FL 34232**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BECKER, POLIAKOFF & STREITFELD, P.A.
630 S. ORANGE AVE.
THIRD FLOOR
SARASOTA FL 34236**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	VPD	☒ DELETE
NAME	ROE, FRANK	
STREET ADDRESS	3753 AMHERST WAY	
CITY - ST - ZIP	SARASOTA FL	

TITLE	VPD	☒ DELETE
NAME	FITZER, MARVIN	
STREET ADDRESS	1740 S ORANGE AVENUE	
CITY - ST - ZIP	SARASOTA FL	

TITLE	TD	☐ DELETE
NAME	JEAN DEERING	
STREET ADDRESS	3722 DELTA ST.	
CITY - ST - ZIP	SARASOTA FL	

TITLE	D	☒ DELETE
NAME	ROE, FRANK	
STREET ADDRESS	3753 AMHERST WAY	
CITY - ST - ZIP	SARASOTA FL	

TITLE	D	☒ DELETE
NAME	SYKES, RICK	
STREET ADDRESS	203 ELLIOT	
CITY - ST - ZIP	SARASOTA FL	

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☐ Change ☒ Addition
1.2 NAME	Luanne Parker	
1.3 STREET ADDRESS	3726 Delta Street	
1.4 CITY - ST - ZIP	Sarasota, Florida 34232	

2.1 TITLE	VPD	☐ Change ☒ Addition
2.2 NAME	Gretchen Thorson	
2.3 STREET ADDRESS	3720 Delta Street	
2.4 CITY - ST - ZIP	Sarasota, Florida 34232	

3.1 TITLE	SD	☐ Change ☒ Addition
3.2 NAME	Nancy Heinrich	
3.3 STREET ADDRESS	3717 Delta Street	
3.4 CITY - ST - ZIP	Sarasota, Florida 34232	

4.1 TITLE	D	☐ Change ☒ Addition
4.2 NAME	Dawn Bigelow	
4.3 STREET ADDRESS	P.O. Box 49042 4503 Nelson Ave.	
4.4 CITY - ST - ZIP	Sarasota, Florida 34230 34231	

5.1 TITLE	D	☐ Change ☒ Addition
5.2 NAME	Victor Shureb	
5.3 STREET ADDRESS	8449 Lone Eagle Way	
5.4 CITY - ST - ZIP	Sarasota, Florida 34242	

6.1 TITLE	D	☐ Change ☒ Addition
6.2 NAME	Kerry Sullivan	
6.3 STREET ADDRESS	218 Barlow Avenue	
6.4 CITY - ST - ZIP	Sarasota, Florida 34232	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Luanne Parker

6/5/98 941-371-4640

CR2E037 (10/97)