

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 721465

1. Entity Name

FAIRWAY OAKS CONDOMINIUM, INC.

Principal Place of Business

245 AMHERST AVE.
SARASOTA FL 34232

Mailing Address

245 AMHERST AVE.
SARASOTA FL 34232

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1428805

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PARKER, LUANNE 3726 DELTA ST SARASOTA FL 34232	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD KUDLOV, MARK 3705 71ST TERR E SARASOTA FL 34243	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD JEAN DEERING 3722 DELTA ST. SARASOTA FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD DEERING, JEAN 3722 DELTA ST SARASOTA FL 34232	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BIGELOW, DAWN 4503 NELSON AVE SARASOTA FL 34231	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD RENSON, EUGENE 3773 DELTA ST SARASOTA FL 34232	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Same	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D DAWN BIGELOW PO BOX 44042 SARASOTA, FL 34230	☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD/D EUGENE BENSON 3773 DELTA ST SARASOTA FL 34232	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D DOUG JONES 408 BARLOW AVE SARASOTA FL 34232	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/D FRANCES WILLIAMS 3751 AMHERST WAY SARASOTA, FL 34232	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 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]* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/09/01

Date

Daytime Phone #

FILED
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90080 024 ****61.25

104108



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)