

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721465

FILED
Jan 18, 2006
Secretary of State

Entity Name: FAIRWAY OAKS CONDOMINIUM, INC.

Current Principal Place of Business:

245 AMHERST AVE.
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

245 AMHERST AVE.
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 59-1428805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER, POLIAKOFF, PA
630 S. ORANGE AVE.
THIRD FLOOR
SARASOTA, FL 34236 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: PD () Delete
Name: RILEY, SANDRA
Address: 3717 COLBY ST
City-St-Zip: SARASOTA, FL 34232

Title: VD () Delete
Name: HORTH, RICHARD
Address: 6207 LAUREL CREEK TRAIL
City-St-Zip: ELLENTON, FL 34222

Title: TD () Delete
Name: JONES, DOUG
Address: 408 BARLOW AVENUE
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: TOROK, TAMAS
Address: 3724 DELTA ST
City-St-Zip: SARASOTA, FL 34232

Title: SD () Delete
Name: CLOUSE, VALORIE
Address: 402 BARLOW AVE.
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: RILEY, SANDRA
Address: 182 GOLDEN SANDS DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: DVP (X) Change () Addition
Name: JONES, DOUGLAS
Address: 408 BARLOW AVENUE
City-St-Zip: SARASOTA, FL 34232

Title: DT (X) Change () Addition
Name: MILLER, MYNDEL
Address: 3756 AMHERST WAY
City-St-Zip: SARASOTA, FL 34232

Title: DS (X) Change () Addition
Name: BREE, KIMBERLY
Address: 405 BARLOW AVE
City-St-Zip: SARASOTA, FL 34232

Title: D (X) Change () Addition
Name: LORD-STEWART, IRENE
Address: 3733 COLBY ST
City-St-Zip: SARASOTA, FL 34232

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: DOUGLAS JONES

DVP

01/18/2006

Electronic Signature of Signing Officer or Director

Date