2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 8:00 am
Secretary of State
05-01-2008 90251 040 ****61.25

DOCUMENT # 721465

1. Entity Name
FAIRWAY OAKS CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
5041 RINGWOOD MEADOW 2 SARASOTA, FL 34232	5041 RINGWOOD MEADOW 2 SARASOTA, FL 34232

01182008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	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
PAMI MANAGEMENT, INC. 5041 RINGWOOD MEADOW SARASOTA, FL 34235	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP CONKLIN, MICHAEL 208 ELLIOTT AVE #136 SARASOTA, FL 34232	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CONKLIN, MICHAEL 208 ELLIOTT AVE #136 SARASOTA, FL 34232	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV NEME, PETER C 223 AMHERST AVE #107 SARASOTA, FL 34232	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD NEMEC, PETER 223 AMHERST AVE #107 SARASOTA FL 34232	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PORTER, RHODA 327 AMHERST AVE #58 SARASOTA, FL 34232	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV CHURCHILL, BEVERLY 3757 AMHERST WAY #35 SARASOTA, FL 34232	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD REY, DANIEL 3737 COLBY ST #6 SARASOTA, FL 34232	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD REY, DANIEL 3737 COLBY ST. #6 SARASOTA, FL 34232	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LORD-STEWART, IRENE 3733 COLBY ST SARASOTA, FL 34232	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COHEN, MARIA 3412 DELTA ST. #131 SARASOTA, FL 34232	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	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 exemptions contained 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 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: _____ 4-29-08 941-228-0251
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #