2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 721465 1. Entity Name FAIRWAY OAKS CONDOMINIUM, INC.					08 OCT - 1 PM 2: 42			
Principal Piece of Business Mailing Address 5041 RINGWOOD MEADOW 5041 RINGWOOD MEADOW					JECHÉTÁRY OF STATE TÁLLAHASSEE, FLORIDA			
2 SARASOTA, FL 34232 SARASOTA, FL 34232					<u>.</u>			
2. Principal Place of Business - No P.O. Box.# 2. 45 Aufgl St Aug Suite, Apt. #, etc. 3. Mailing Address Suite, Apt. #, etc.					00000000	an arera arer am erak erak	037 (12/06)	
SARAS IA			ل سه		4. FEI Number 59-1428805			oplied For
Zip	Country	SAR RSOFA	Country				\$8.75 Add	ot Applicable
342	32 SARASSTA 6. Name and Address of Current	34232	SARI	as ata	5. Certificate of Sta		Fee Require	
5041 RING	IAGEMENT, INC. SWOOD MEADOW A, FL 34235	7. Name and Address of New Registered Agent ERLY CHURCHILL P.O. Bot Number is Not Acceptable) FI 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 SIGNATURE Signature, typed or printed rame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) P. Election Campaign Financing Trust Fund Contribution. Amended AR is \$61.25 Make check payable to Florida Department of State								
10.	OFFICERS AND DIF	RECTORS	11.		ADDITIONS/CHANGE	S TO OFFICERS AND I		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CONKLIN, MICHAEL 208 ELLIOTT AVE #136 SARASOTA, FL 34232	☑ Delete	TITLE NAME STREET AI CITY-ST-	DORESS 105 ZIP SAI	RUHAM, JO E AMHERS RASOTA, F	OYCË ST AUE SL 34232	☑ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD NEME, PETER C 223 AMHERST AVE #107 SARASOTA, FL 34232	🗹 Delete	TITLE NAME STREET AI CITY-ST-	DORESS (O)	TERSON, L D BARLOU RASOTA	IND A AUE	☑ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV CHURCHILL, BEVERLY 3757 AMHERST WAY #35 SARASOTA, FL 34232	☐ Delete	TITLE NAME STREET AI CITY-ST-		80.0 10/02/0	013658 8010480	1 1 98 1 4 **61	□ Addition .25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD REY, DANIEL 3737 COLBY ST #6 SARASOTA, FL 34232	☐ Defete	TITLE NAME STREET AI CITY-ST-				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COHEN, MARIA 3412 DELTA ST. #131 SARASOTA, FL 34232	☐ Deleta	TITLE NAME STREET AL CITY-ST-	1			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET AL CITY-ST-	1			☐ 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 94/-822-0029 SIGNATURE AND TYPED OR PROVIDED NAME OF SIGNING OFFICER OR DIRECTOR 9/29/08 94/-822-0029 Daty Daty Daty								