

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725475

FILED
Jan 24, 2009
Secretary of State

Entity Name: FAIRWAY OAK VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

C/O AMELIA ISLAND MANAGEMENT, INC.
3000 FIRST COAST HWY.
AMELIA ISLAND, FL 32034

New Principal Place of Business:

Current Mailing Address:

C/O AMELIA ISLAND MANAGEMENT, INC.
3000 FIRST COAST HWY.
AMELIA ISLAND, FL 32034

New Mailing Address:

FEI Number: 59-1567342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEALAN, JACK B JR
3000 FIRST COAST HWY.
AMELIA ISLAND, FL 32034 US

Name and Address of New Registered Agent:

MUIR, ROBERT C III
AMELIA ISLAND MANAGEMENT
3000 FIRST COAST HIGHWAY
AMELIA ISLAND, FL 32034 US

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: ROBERT C. MUIR, III

01/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BERTKE, WILLIAM,
Address: 1890 S 14TH ST STE 305
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: PD () Delete
Name: JONES, CLAXTON
Address: 3208 SEAMARSH RD
City-St-Zip: AMELIA ISLAND, FL 32034

Title: VD () Delete
Name: BREMSON, BETTY
Address: 3305 SEA MARSH RD.
City-St-Zip: AMELIA ISLAND, FL 32034

Title: STD () Delete
Name: REECE, DALE S
Address: 3211 FAIRWAY OAKS
City-St-Zip: AMELIA ISLAND, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BERTKE, WILLIAM,
Address: 3205 SEA MARSH ROAD
City-St-Zip: AMELIA ISLAND, FL 32034

Title: STD (X) Change () Addition
Name: HEADRICK, PATRICIA H
Address: 4105 STIRRUP LANE
City-St-Zip: COHUTTA, GA 30710

Title: PD (X) Change () Addition
Name: BREMSON, BETTY
Address: 3305 SEA MARSH RD.
City-St-Zip: AMELIA ISLAND, FL 32034

Title: D (X) Change () Addition
Name: REECE, DALE S
Address: 3211 FAIRWAY OAKS
City-St-Zip: AMELIA ISLAND, FL 32034

I hereby certify that the information supplied with this filing does not qualify 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: BETTY BREMSON

P

01/24/2009

Electronic Signature of Signing Officer or Director

Date