

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725475

FILED
Mar 08, 2010
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:

MUIR, ROBERT C III
AMELIA ISLAND MANAGEMENT
3000 FIRST COAST HIGHWAY
AMELIA ISLAND, FL 32034 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: D
Name: BERTKE, WILLIAM
Address: 3000 FIRST COAST HIGHWAY
City-St-Zip: AMELIA ISLAND, FL 32034

Title: STD
Name: HEADRICK, PATRICIA H
Address: 3000 FIRST COAST HIGHWAY
City-St-Zip: AMELIA ISLAND, FL 32034

Title: PD
Name: BREMSON, BETTY
Address: 3000 FIRST COAST HIGHWAY
City-St-Zip: AMELIA ISLAND, FL 32034

Title: D
Name: GEMMILL, JANET
Address: 3000 FIRST COAST HIGHWAY
City-St-Zip: AMELIA ISLAND, FL 32034

Title: D
Name: JONES, LARRY
Address: 3000 FIRST COAST HIGHWAY
City-St-Zip: AMELIA ISLAND, FL 32034

I hereby 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 all other like empowered.

SIGNATURE: BETTY BREMSON

P

03/08/2010

Electronic Signature of Signing Officer or Director

Date