

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727044

FILED  
Feb 07, 2012  
Secretary of State

**Entity Name:** THE FAIRVIEW CONDOMINIUM OF ST. AUGUSTINE SHORES, INC.

**Current Principal Place of Business:**

600 DOMENICO CIRCLE  
SAINT AUGUSTINE, FL 32086 US

**New Principal Place of Business:**

600 DOMENICO CIRCLE OFFICE  
SAINT AUGUSTINE, FL 32086 US

**Current Mailing Address:**

600 DOMENICO CIRCLE  
SAINT AUGUSTINE, FL 32086 US

**New Mailing Address:**

**FEI Number:** 59-1874119      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SCHMITT, EDWARD  
600 DOMENICO CIR, F-6  
SAINT AUGUSTINE, FL 32086 US

**Name and Address of New Registered Agent:**

SCHMITT, EDWARD  
908 SANTA CLARA AVE  
SAINT AUGUSTINE, FL 32086 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: EDWARD SCHMITT

02/07/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SCHMITT, EDWARD  
Address: 908 SANTA CLARA AVE  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: VP  
Name: SCHRODER, WILLIAM  
Address: 600 DOMENICO CIRCLE, G-12  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: T  
Name: FORRESTER, KEN  
Address: 997 OXFORD DRIVE ST  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: S  
Name: MCPHERSON, LINDA A  
Address: 600 DOMENICO CIR, G-13  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D  
Name: THURHEIMER, NANCY  
Address: 600 DOMENICO CIR A-12  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D  
Name: CONKLIN, FAYE  
Address: 600 DOMENICO CIRCLE B-1  
City-St-Zip: SAINT AUGUSTINE, FL 32086

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: EDWARD SCHMITT

P

02/07/2012

Electronic Signature of Signing Officer or Director

Date