## FILED Apr 04, 2008 8:00 am

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		ANNUAL	REPO	RT	
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								. Se	creta	ary of S	NT91	re –	
DOCUMENT # 727693  1. Entity Name FAIRWINDS COVE, PHASE I CONDOMINIUM ASSOCIATION, INC.										90022 011 **			
Principal Place of Business  3472 NE CAUSEWAY BLVD  JENSEN BEACH, FL 34957 US  STE 100  STUART, FL 349					r US			) (1800) (8010 UT	)  100f0 0f110 1210	8 (1)1 87811 81811 40811 818	II <b>148</b> 11 <b>1</b> 711	1184 20 1888	
Principal Place of Business - No P.O. Box #													
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.			01162008	Chg-NP	CR2E037 (1	12/06)			
City & State			City & State				4. FEI Number 59-15802	86			plied For Applicable		
Zip	-	Country	· Zip		Соц	untry		5. Certificate of Status Desired   \$8.75 Additional Fee Required					
	6. Name	and Address of Current F	Registere	d Agent			• •	7. Name and Ad	ldress of Nev	v Registered Ager	rt		
FORTE, LORRAINE H 1111 SW FEDERAL HWY						Name  Street Address (P.O. Box Number is Not Acceptable)							
STE 100 JENSEN E	REACH FI	34057								<del></del>			
JENOEN	oeson, i e	. 04001				City	ity 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													
- Filing Fee is \$61.25 9. Election Campaign - Due by May 1, 2008 Trust Fund Contrib						_		\$5.00 May Be Added to Fees Make check payable to Florida Department of State					
10.	1	OFFICERS AND DIR	ECTORS		11.		<u> </u>	ADDITIONS/CHAN	GES TO OFFI	CERS AND DIREC			
TITLE	VPD	AN CTUADT		☐ Delete	TITLE		$ \mathcal{V} $			X	Change	☐ Addition	
NAME STREET ADDRESS	ł	NN, STUART CAUSEWAY BLVD #404	ı		, NAM STRE	et address				•			
CITY-ST-ZIP	1	BEACH, FL 34957	•			-ST-ZIP							
TITLE	D	·		☐ Delete	TITLE	 E	VPD			X	Change	Addition	
NAME	BAUGHN,	DAVID			NAM		שוו			/*	•		
STREET ADDRESS	1	CAUSEWAY BLVD #302	2			ET ADDRESS							
CITY-ST-ZIP	PD	BEACH, FL 34957		☐ Defete	-	-ST-ZIP	;=	<del>=</del>			Change	☐ Addition	
NAME	·-	DUGH, JOHN		L.) Detete	NAM					Ц	Citalige		
STREET ADDRESS	FAIRWING	OS COVE 1-401			STRE	ET ADDRESS							
CITY-ST-ZIP	<del>                                     </del>	BEACH, FL 34957				-ST-ZIP		····		<u></u>			
TITLE NAME	TD   DEWOLF,	IAMES		☐ Delete	TITLE						Change	☐ Addition	
STREET ADDRESS		OS COVE 1-403				ET ADDRESS							
CITY-\$T-ZIP	JENSEN E	BEACH, FL 34957			CITY	-ST-ZIP							
TITLE .	SD	101		☐ Delete	TITU						Change	Addition	
NAME STREET ADDRESS	MEADE, J	IQHN CAUSEWAY BLVD #304	1		NAM	E Et address							
CITY-ST-ZIP		BEACH, FL 34957	•			-ST-ZIP						-	
TITLE	कर्तिका	<del></del>		☐ Delete	tπu	<u> </u>				٠ 🛚	Change	Addition	
NAME OVERT A DESCRIPTION					NAM						•		
STREET ADDRESS CITY-ST-ZIP			<del></del>		CITY	ET ADDRESS -st-zip							
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: James R. De Wolf 4-2-08													
		SIGNATURE AND TYPED OR PI	STED HAM	E OF BENNING OFFICER	OR DIRECT	700			Date	Doutire	Phone #		