


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2005 8:00 am
Secretary of State

04-12-2005 90129 003 ****61.25

DOCUMENT # 733117 1. Entity Name FAIRGREEN UNIT 1B OWNERS' ASSOCIATION, INC.	
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Principal Place of Business 8 CHIP LANE NEW SMYRNA BEACH FL 32168 US	Mailing Address 8 CHIP LANE NEW SMYRNA BEACH FL 32168 US
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2. Principal Place of Business 11 PAR DRIVE	3. Mailing Address 11 PAR DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State New Smyrna Beach, FL	City & State New Smyrna Beach, FL
Zip 32168	Country Volusia



1st MOORE CR2E037 (10/04)

4. FEI Number 59-1768046	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SUSSENBERGER, ELLIE 8 CHIP LANE NEW SMYRNA BEACH FL 32168	
7. Name and Address of New Registered Agent Name: IRENE MURDOCH Street Address (P.O. Box Number is Not Acceptable): 11 PAR DRIVE City: New Smyrna Beach FL Zip Code: 32168	

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: IRENE MURDOCH, Sec. Treasurer *Irene Murdoch* 4/1/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering.) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURDOCK, IRENE 11 PAR DR. NEW SMYRNA BEACH FL 32168 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec. Treasurer IRENE MURDOCH <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD SUSSENBERGER, ELLIE 8 CHIP LANE NEW SMYRNA BEACH FL 32168 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Gerald Marceau 4 Birdie Drive New Smyrna Beach, FL 32168 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SUSSENBERGER, JOHN 8 CHIP LANE NEW SMYRNA BEACH FL 32168 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director George Landry 12 Chip Lane New Smyrna Beach, FL 32168 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DENAUI, FRANK 5 PAR DR. NEW SMYRNA BEACH FL 32168 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SONGSTER, JOYCE 6 SANDRA CIRCLE NEW SMYRNA BEACH FL 32168 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEMPSEY, DIANE 19 EAGLE LANE NEW SMYRNA BEACH FL 32168 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Irene Murdoch - Sec. Treasurer* IRENE MURDOCH-386428-5613/4/1/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Date Phone #

ATTACHMENT

40053898
733117

#11

Director
John Vazquez
705 Faulkner Ave
New Smyrna Beach, FL 32168