

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 06, 2001 8:00 am
Secretary of State

0054020

DOCUMENT # 743730

1. Entity Name

FAIRFIELD APARTMENTS CONDOMINIUM ASSOCIATION, IN

04-06-2001 90037 041 ****61.25

Principal Place of Business

Mailing Address

C/O ASSOCIATED PROPERTY MANAGEMENT
 400 S DIXIE HWY. SUITE 10
 LAKE WORTH FL 33460

C/O ASSOCIATED PROPERTY MANAGEMENT
 400 S DIXIE HWY. SUITE 10
 LAKE WORTH FL 33460



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1888916

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ASSOCIATED PROPERTY MANAGEMENT
400 S DIXIE HWY, SUITE 10
LAKE WORTH FL 33460

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEES IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	D <input type="checkbox"/> Delete
STREET ADDRESS	BARBARA BELLEMAN
CITY-ST-ZIP	2309 S. FEDERAL HWY #6 BOYNTON BEACH FL
TITLE NAME	D <input type="checkbox"/> Delete
STREET ADDRESS	FLOCK, IRENE L.
CITY-ST-ZIP	2309 S. FEDERAL HWY. #25 BOYNTON BCH. FL
TITLE NAME	D <input type="checkbox"/> Delete
STREET ADDRESS	GROCKER, ALBERT B.
CITY-ST-ZIP	2309 S FEDERAL HIGHWAY, #6 SOUTH BOYNTON BEACH FL 33435
TITLE NAME	D <input type="checkbox"/> Delete
STREET ADDRESS	GORDON, PHILLIP
CITY-ST-ZIP	2303 S FEDERAL HIGHWAY, #16 NORTH BOYNTON BEACH FL 33435
TITLE NAME	D <input checked="" type="checkbox"/> Delete
STREET ADDRESS	KRUGER, MYRTLE
CITY-ST-ZIP	2300 S. FEDERAL HWY., #20 BOYNTON BEACH FL 33435
TITLE NAME	D <input checked="" type="checkbox"/> Delete
STREET ADDRESS	PINEAU, JOSEPH
CITY-ST-ZIP	2309 S FEDERAL HIGHWAY, #10 SOUTH BOYNTON BEACH FL 33435

TITLE NAME	PS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	CASTANEDA, SYLVIA
CITY-ST-ZIP	4201 NE 31 ST LIGHTHOUSE PT, FL 33040
TITLE NAME	DT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	DOANE, RITA
CITY-ST-ZIP	2303 S. FED. HWY # 8 N BOYNTON BEACH, FL 33435
TITLE NAME	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	ZWANOK
CITY-ST-ZIP	2309 S. FED HWY # 14 S BOYNTON BEACH, FL 33040
TITLE NAME	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	LOPEZ, LOUIS
CITY-ST-ZIP	2309 S. FED HWY # 19 N BOYNTON BEACH FL 33040
TITLE NAME	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	VOLPE, KATHY
CITY-ST-ZIP	2309 S. Fed. Hwy No. 15 BOYNTON BEACH, FL 33435
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	

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:

[Handwritten Signature]

3/1/01 368-519

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)