

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

03-29-2002 90206 032 ****61.25

0036819

DOCUMENT # 743730

1. Entity Name

FAIRFIELD APARTMENTS CONDOMINIUM ASSOCIATION, IN C.

Principal Place of Business C/O ASSOCIATED PROPERTY MANAGEMENT 400 S DIXIE HWY. SUITE 10 LAKE WORTH FL 33460	Mailing Address C/O ASSOCIATED PROPERTY MANAGEMENT 400 S DIXIE HWY. SUITE 10 LAKE WORTH FL 33460
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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: FEE 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. **VD** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Delete
NAME	BARBARA BELLEMAN	
STREET ADDRESS	2309 S. FEDERAL HWY #6	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE	PS	<input checked="" type="checkbox"/> Delete
NAME	CASTANEDA, SYLVIA	
STREET ADDRESS	4201 NE 31 ST	
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33040	
TITLE	DT	<input checked="" type="checkbox"/> Delete
NAME	DOANE, RITA	
STREET ADDRESS	2303 S. FED. HWY #8 N	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	P	<input type="checkbox"/> Delete
NAME	GORDON, PHILLIP	
STREET ADDRESS	2303 S FEDERAL HIGHWAY, #16 NORTH	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LOPEZ, LOUIS	
STREET ADDRESS	2309 S. FEDERAL HWY #19N	
CITY-ST-ZIP	BOYNTON BCH FL 33040	
TITLE	D	<input type="checkbox"/> Delete
NAME	VOLPE, KATHY	
STREET ADDRESS	2309 S. FEDERAL HWY #25	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	

TITLE	Craig D. Earnhart	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2303 S. Federal Hwy #14-N	
STREET ADDRESS	Boynton Beach, FL 33435	
CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jara, Steve	
STREET ADDRESS	2303 S. Federal Hwy # 21-N	
CITY-ST-ZIP	Boynton Beach, FL 33435	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Marino, Lisa Rowland	
STREET ADDRESS	2309 S. Federal Hwy # 2-5	
CITY-ST-ZIP	Boynton Beach, FL 33435	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lavletta, Peter	
STREET ADDRESS	2309 S. Federal Hwy # 16-5	
CITY-ST-ZIP	Boynton Beach, FL 33435	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/02 (561)369-5195

Date Daytime Phone #

CFR2E037 (9/01)