


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2008 8:00 am
Secretary of State

03-12-2008 90018 034 ****61.25

DOCUMENT # 743730					
1. Entity Name FAIRFIELD APARTMENTS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business ASSOCIATED PROPERTY MGMT 1928 LAKE WORTH RD LAKE WORTH, FL 33461			Mailing Address ASSOCIATED PROPERTY MGMT 1928 LAKE WORTH RD LAKE WORTH, FL 33461		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1888916	
Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country	02202008 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
ASSOCIATED PROPERTY MANAGEMENT 1928 LAKE WORTH ROAD LAKE WORTH, FL 33461			Name DICKER, KRIVOK + STOLOFF Street Address (P.O. Box Number is Not Acceptable) 1818 AUSTRALIAN AVE SOUTH SUITE 400 City WEST PALM BEACH FL Zip Code 33409		
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		<i>Edward Dicker of Dicker Krivok + Stolloff</i>		<i>Ed Dicker, Dick Krivok + Stolloff 2/20/08</i>	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE	
Filing Fee is \$61.25 Due by May 1, 2008		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					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CUNNIFF, ELLEN		NAME	LINN, NANCY	
STREET ADDRESS	1200 S OCEAN BLVD 10 F		STREET ADDRESS	2309 SO. FEDERAL HWY.#3-5	
CITY-ST-ZIP	BOCA RATON, FL 33432		CITY-ST-ZIP	BOYNTON BEACH, FL 33435	
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JARA, STEPHEN		NAME	MARTINCAUVE, JANICE	
STREET ADDRESS	229 GEORGE BUSH BLVD		STREET ADDRESS	3613 SILVER LACE LN.#66	
CITY-ST-ZIP	DELRAY BEACH, FL 33444		CITY-ST-ZIP	BOYNTON BEACH, FL 33435	
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LINN, NANCY		NAME	CUNNIFF, ELLEN	
STREET ADDRESS	2309 SO. FEDERAL HWY #3-5		STREET ADDRESS	1200 SO. OCEAN BLVD.#10-F	
CITY-ST-ZIP	BOYNTON BEACH, FL 33435		CITY-ST-ZIP	BOYNTON BEACH, FL 33435	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	VOLPE, KATHLEEN	
STREET ADDRESS			STREET ADDRESS	5615 NO. OCEAN BLVD.	
CITY-ST-ZIP			CITY-ST-ZIP	OCEAN RIDGE, FL 33435	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-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: <i>Nancy Linn</i>		Date: <i>3-6-08</i>		Daytime Phone #: <i>561-731-0282</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

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