

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 31, 2011**  
**Secretary of State**

DOCUMENT# 743769

**Entity Name:** THE FAIRWAYS CONDOMINIUM AT PALM COAST, INC.**Current Principal Place of Business:**100 FAIRWAYS CIRCLE  
PALM COAST, FL 32137**New Principal Place of Business:****Current Mailing Address:**100 FAIRWAYS CIRCLE  
PALM COAST, FL 32137**New Mailing Address:****FEI Number:** 59-2004615**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.  
2500 MAITLAND CTR PKWY  
SUITE 209  
MAITLAND, FL 32751 US**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: THOMSON, DOROTHY  
Address: 19 MID PINES CIRCLE  
City-St-Zip: PALM COAST, FL 32137

Title: S  
Name: THOMAS, GRACE C  
Address: 23 FAIRWAYS CIRCLE  
City-St-Zip: PALM COAST, FL 32137

Title: VP  
Name: SINGLE, JULIUS  
Address: 10 FAIRWAYS CIRCLE  
City-St-Zip: PALM COAST, FL 32137

Title: T  
Name: BENAVIDES, EVA  
Address: 2 CENTER PLACE  
City-St-Zip: PALM COAST, FL 32137

Title: D  
Name: HALL, WILLIAM  
Address: 89 FENIMORE LANE  
City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GRACE C. THOMAS

S

08/31/2011

Electronic Signature of Signing Officer or Director

Date