

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745316

FILED  
Feb 13, 2012  
Secretary of State

**Entity Name:** SOUTH FAIRWAYS CONDOMINIUM, INC.

**Current Principal Place of Business:**

3120 FINSTERWALD DR  
TITUSVILLE, FL 32780 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 814  
TITUSVILLE, FL 32781 US

**New Mailing Address:**

**FEI Number:** 59-2873645

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TAMPONE, LEONARD  
3120 FINSTERWALD DR  
TITUSVILLE, FL 32780 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: PAYNE, ELEANOR R.  
Address: 3124 FINSTERWALD DR.  
City-St-Zip: TITUSVILLE, FL

Title: D  
Name: GAGLIARDI, DENNIS  
Address: 3088 FINSTERWALD DR  
City-St-Zip: TITUSVILLE, FL 32780

Title: D  
Name: WOODS, RICHARD  
Address: 3084 FINSTERWALD DR.  
City-St-Zip: TITUSVILLE, FL 32780

Title: ST  
Name: TAMPONE, LEONARD  
Address: 3120 FINSTERWALD DR  
City-St-Zip: TITUSVILLE, FL 32780

Title: D  
Name: CARDINALE, LUADES  
Address: 2850 LACITA LANE  
City-St-Zip: TITUSVILLE, FL 32780

Title: D  
Name: SMITH, GAIL  
Address: 523 TWIN LAKES DRD  
City-St-Zip: TITUSVILLE, FL 32780

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: RICHARD WOODS

D

02/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date