

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745373

Entity Name: F.A.I.R., INC.

FILED
Jan 27, 2009
Secretary of State

Current Principal Place of Business:

5800 FERNLEY DR W # 72
WEST PALM BEACH, FL 33415

New Principal Place of Business:

Current Mailing Address:

5800 FERNLEY DR W #72
W
WEST PALM BEACH, FL 33415

New Mailing Address:

5800 FERNLEY DR W # 72
WEST PALM BEACH, FL 33415

FEI Number: 59-1882296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLASSMAN, HERMAN
5800 FERNLEY DR W, #72
W. PALM BEACH, FL 33415 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: DPT () Delete
Name: GLASSMAN, HERMAN
Address: 5800 FERNLEY DR W, #72
City-St-Zip: WEST PALM BEACH, FL 33415

Title: BMT () Delete
Name: GLASSMAN, LUCILLE
Address: 5600 FERNLEY DR W
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: HERMAN GLASSMAN

DPT

01/27/2009

Electronic Signature of Signing Officer or Director

Date