2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

May 06, 2005 8:00 am Secretary of State DOCUMENT # 745887 05-06-2005 90095 013 ****61.25 FAIRFIELD A CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address STERLING MANAGEMENT STERLING MANAGEMENT 1701-B RICKENBACKDER DRIVE × 50050038 1701-B RICKENBACKDER DRIVE SUN CITY CENTER FL 33573 SUN CITY CENTER FL 33573 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 59-1980999 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Law Offices of James R. De Furio, P.A. DE FURIO, JAMES R ESQ 201 East Kennedy Boulevard 101 E KENNEDY BLVD **Suite 1460 STE 3000 TAMPA FL 33602** Tampa, Florida 33602 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 ped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to П Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PΩ **Addition** TITLE 💢 Delete TITLE ☐ Change Brvta, Barbara 501-A Falkirk Ct. ABDULLATIF, AL NAME 509-A FOX GLOVE CIR STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-7IP CITY-ST-ZIP <u>Sun City Center, Fl 33573</u> TITLE Delete TITLE Change X Addition ROSSMAN, CHARLES NAME NAME olwin, David 502-A FOXGLOVE CIR 505-A Foxglove Cir. Sun City Center, Fl 33573 STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-ZIP CITY-ST-7IP TITLE Delete THEF ☐ Change X Addition Johnson, Kenneth 511- A Forglove Cir. NAME ABDULLATIF, PATRICIA NAME 509-A FOXGLOVE CIR STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-ZIP CHY-ST-ZIP Sun City Center, FL 33573 TITLE ☐ Delete Change ☐ Addition FISHMAN, JUNC NAME NAME 503A FALKIRK CT STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-ZIP CITY-ST-ZIP THILE Detete TITLE Change Addition ROSSMAN, BARBARA NAME NAME 502-A FOXGLOVE CIR STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete MILE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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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: Barbara a. Britis President BARBARA A. BRTVA 5/2/05 813-633-9028