2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745889

FILED Apr 29, 2009 Secretary of State

Entity Name: FAIRFIELD C CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: STERLING MGMT INC 1904 CLUBHOUSE DR SUN CITY CENTER, FL 33573 **New Mailing Address: Current Mailing Address:** STERLING MGMT INC 1904 CLUBHOUSE DR SUN CITY CENTER, FL 33573 FEI Number: 59-1981353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DE FURIO, JAMES R ESQ WETHERINGTON, HAMILTON, HARRISON & FAIR PA 201 EAST KENNEDY BOULEVARD 1010 N. FLORIDA AVE **SUITE 1460** TAMPA, FL 33602 TAMPA, FL 33602 US 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: RONALD COTTERILL 04/29/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition STYLE, MARGARET Name: Name: 302-A FRIAR CT. Address: Address: City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: Title: () Delete Title: TD (X) Change () Addition BAGAARD, DOROTHY Name: BOGAARD, DOROTHY Name: Address: 303-A FRIAR CT. Address: 303-A FRIAR CT. City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: SUN CITY CENTER, FL 33573 Title: () Delete Title: () Change () Addition AUMACK, MILLIE Name: Name: 1824-A FOXHUNT DR. Address: Address: City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: Title: VSD () Delete Title: () Change () Addition LANGLEY, ELIZABETH Name: Name: Address: 403-A FINCHELY CT Address: City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: Title: () Delete Title: () Change (X) Addition DAVIS, FORREST Name: Name: 1905 CANTERBURY LN. E-20 Address: Address: City-St-Zip: City-St-Zip: SUN CITY CENTER, FL 33573

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: BRIAN L. MAY MGR 04/29/2009