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

I hereby certify that the information supplied with this fiji

emp

indicated on this report or supplemental report is tru of the corporation or the receiver or trustee

changed, or on an attachment

SIGNATURE:

May 06, 2005 8:00 am Secretary of State **DOCUMENT # 745890** 1. Entity Name 05-06-2005 90095 011 ****61.25 FAIRFIELD D CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address STERLING MANAGEMENT INC 1701-B RICKENBACKER DRIVE SUN CITY CENTER FL 33573 STERLING MANAGEMENT INC 1701-B RICKENBACKER DRIVE SUN CITY CENTER FL 33573 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) 1st MOORE Applied For City & State City & State 4. FEI Number 59-1981350 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Law Offices of James R. De Furio, P.A. DEFURIO, 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 registe **SIGNATURE** d or printed name of registered agent and title if epplicable DATE (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 Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TSD VPD Change X Addition TITLE ☐ Delete TITLE DAVISSON, MARILYN Lougeman, John NAME 405 B FLANBOROUGH TR 1402-A Flanborough Trail STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-ZIP CITY-ST-ZIP Sun City Conter, FL 33573 PD ☐ Delete TITLE Change 🔀 Addition TITLE MCNasson John NEWTON, IRENE NAME NAME 406-B Flanborough Tr. Sun City Center, FL 33573 407B FLANBOROUGH TR. STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-ZIP CITY-ST-ZIP VD Delete Change ☐ Addition TITLE TITLE MCNASSOR, JOHN NAME 406B FLANBOROUGH TR. STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE [] Change Addition THUE EWING, FELICIA NAME NAME 411-B FLANBOROUGH TR. STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-ZIP CITY-ST-7IE TITLE Delete TITLE Change LUCAS, OLIVE NAME NAME 1820A FOXHUNT DR. STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP g does not qualify for the exemption stated in Section 1 19.07(3)(i), Florida Statutes. I further certify that the information

accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director except the resort as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

5/3/2015 813-642-8990

FILED