

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746381

FILED
Jan 19, 2005
Secretary of State

Entity Name: THE FAIRWAYS AT SILVER SPRINGS SHORES CONDOMINIUM NO. 6, INC.

Current Principal Place of Business:

CONDO NO. 6, INC.
528B FAIRWAYS CIRCLE
OCALA, FL 344728514 US

New Principal Place of Business:

Current Mailing Address:

CONDO NO. 6, INC.
528B FAIRWAYS CIRCLE
OCALA, FL 344728514 US

New Mailing Address:

FEI Number: 59-2056640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOCHINSKI, TONY
528B BAHIA CIR.
OCALA, FL 34472 US

Name and Address of New Registered Agent:

WOCHINSKI, TONY
536 B FAIRWASY CIR.
OCALA, FL 34472 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: _____

01/19/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: SCHULZ, PEGGY
Address: 544B FAIRWAYS CIRCLE
City-St-Zip: OCALA, FL 34472

Title: SD () Delete
Name: GREEN, DOROTHY
Address: 538A FAIRWAYS CIRCLE
City-St-Zip: OCALA, FL 34472

Title: VD () Delete
Name: SMAIL, IVAN
Address: 516B FAIRWAYS CIR.
City-St-Zip: OCALA, FL 34472

Title: PD () Delete
Name: WOCHINSKI, TONY
Address: 528B BAHIA CIRCLE
City-St-Zip: OCALA, FL 34472

Title: D () Delete
Name: REILLY, BILL
Address: 548A FAIRWAYS CIR.
City-St-Zip: OCALA, FL 34472

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FAULKNER, BOB
Address: 516 B BAHIA CIRCLE
City-St-Zip: OCALA, FL 34472

Title: SD (X) Change () Addition
Name: GREEN, DOROTHY
Address: 520 A FAIRWAYS CIRCLE
City-St-Zip: OCALA, FL 34472

Title: VD (X) Change () Addition
Name: SMAIL, IVAN
Address: 516 B FAIRWAYS CIR.
City-St-Zip: OCALA, FL 34472

Title: PD (X) Change () Addition
Name: WOCHINSKI, TONY
Address: 536 B FAIRWAYS CIRCLE
City-St-Zip: OCALA, FL 34472

Title: TD (X) Change () Addition
Name: REILLY, BILL
Address: 548 A FAIRWAYS DR.
City-St-Zip: OCALA, FL 34472

I hereby certify that the information supplied with this filing does not qualify for the 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 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: T WOCHINSKI

PD

01/19/2005

Electronic Signature of Signing Officer or Director

Date