

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 22, 2006 8:00 am
Secretary of State

05-22-2006 90044 033 ****61.25

DOCUMENT # 746504 1. Entity Name FAIRMONT ESTATES HOMEOWNERS ASSOCIATION, INC.	
--	---

Principal Place of Business FAIRMONT ESTATES 36 SW BLACKBURN TERR, #4 STUART FL 34997 US	Mailing Address FAIRMONT ESTATES P.O. BOX 2767 STUART FL 34995 US
--	---

2. Principal Place of Business Fairmont Estates Suite, Apt. #, etc. 69 SW Blackburn Terr, # 3 City & State Stuart, FL Zip 34997 Country USA	3. Mailing Address Suite, Apt. #, etc. City & State Zip Country
--	---



1st MOORE CR2E037 (10/05)

4. FEI Number 59-2400335	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GRAZI, LEIF 217 E OCEAN BLVD. STUART FL 34994	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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 _____ (NOTE: Registered Agent signature required when resigning) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
--	--	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD VFALENTINE, RICHARD 89 SW BLACKBURNTER # 9 STUART FL 34997 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD COUGHANOUR, MARY 99 SW BLACKBURN TERRACE # 10 STUART FL 34997 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD KESSLER, MARGARET 69 SW BLACKBURN TERRACE # 3 STUART FL 34997 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD KESSLER, MARGARET 69 SW BLACKBURN TERRACE # 3 STUART FL 34997 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Margaret Kessler January 27, 2006 772-631-2909