# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 01, 2009**
**Secretary of State**

DOCUMENT# 746504

**Entity Name:** FAIRMONT ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

89 SW BLACKBURN TERR, #3
STUART, FL 34997 US

**New Principal Place of Business:**

89 SW BLACKBURN TERR, #1
STUART, FL 34997 US

**Current Mailing Address:**

FAIRMONT ESTATES
P.O. BOX 2767
STUART, FL 34997 US

**New Mailing Address:**

**FEI Number: 59-2400335** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GRAZI, LEIF
217 E OCEAN BLVD.
STUART, FL 34994 US

**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

| | | |
|---|---|---|
| Title: | PD | ( ) Delete |
| Name: | HODGES, JERRY | |
| Address: | 70 SW BLACKBURN TERR #10 | |
| City-St-Zip: | STUART, FL 34997 | |
| Title: | VD | ( ) Delete |
| Name: | HOLMBERG, INGRID | |
| Address: | 50 SW BLACKBURN TERR #4 | |
| City-St-Zip: | STUART, FL 34997 | |
| Title: | SD | ( ) Delete |
| Name: | BLAZER, RICHARD | |
| Address: | 89 SW BLACKBURN TERR#1 | |
| City-St-Zip: | STUART, FL 34997 | |
| Title: | TD | ( ) Delete |
| Name: | BLAZER, RICHARD | |
| Address: | 89 SW BLACKBURN TERR#1 | |
| City-St-Zip: | STUART, FL 34997 | |
| Title: | D | ( ) Delete |
| Name: | LEWIS, JIM | |
| Address: | 69 SW BLACKBURN TERR #9 | |
| City-St-Zip: | STUART, FL 34997 | |
| Title: | D | (X) Delete |
| Name: | BRIDGES, DOROTHY | |
| Address: | 80 SW BLACKBURN TERR #5 | |
| City-St-Zip: | STUART, FL 34997 | |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | | |
|---|---|---|
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | SD | (X) Change ( ) Addition |
| Name: | BLAZEK, RICHARD | |
| Address: | 89 SW BLACKBURN TERR#1 | |
| City-St-Zip: | STUART, FL 34997 | |
| Title: | TD | (X) Change ( ) Addition |
| Name: | BLAZEK, RICHARD | |
| Address: | 89 SW BLACKBURN TERR#1 | |
| City-St-Zip: | STUART, FL 34997 | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |

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: JIM LEWIS D 02/01/2009

Electronic Signature of Signing Officer or Director — Date