

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746692

FILED  
Mar 16, 2012  
Secretary of State

**Entity Name:** FAIRLANE HARBOR MOBILE HOME OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

196 ARBOR LANE  
VERO BEACH, FL 32960

**New Principal Place of Business:**

196 ARBOR LANE  
VERO BEACH, FL 32960 US

**Current Mailing Address:**

196 ARBOR LANE  
VERO BEACH, FL 32960

**New Mailing Address:**

196 ARBOR LANE  
VERO BEACH, FL 32960 US

**FEI Number:** 59-2385248

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WALSH, LAURENCE T SR  
196 ARBOR LANE  
VERO BEACH, FL 32960 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  
Name: STANDLEY, STEPHEN  
Address: 125 SILVERY LANE  
City-St-Zip: VERO BEACH, FL 32960 US

Title: VD  
Name: GILBERT, JUDITH  
Address: 18 S. HARBOR DR.  
City-St-Zip: VERO BEACH, FL 32960 US

Title: TD  
Name: WALSH, LAURENCE T SR.  
Address: 196 ARBOR LANE  
City-St-Zip: VERO BEACH, FL 32960 US

Title: VD  
Name: BURCHAM, THOMAS  
Address: 25 S. HARBOR DR.  
City-St-Zip: VERO BEACH, FL 32960 US

Title: SD  
Name: GRIFFIN, LINDA  
Address: 201 CORAL LANE  
City-St-Zip: VERO BEACH, FL 32960 US

I hereby 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 all other like empowered.

SIGNATURE: LAURENCE T. WALSH, SR.

TD

03/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date