2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 746692

1. Entity Name



FILED Apr 28, 2003 8:00 am Secretary of State
04-28-2003 90453 039 ****61.25

FAIRLANE HARBOR MOBILE HOME OWNERS ASSOCIATION, INC.								
Principal Place of Business 81 S HARBOR OR VERO BEACH FL 32960		Mailing Address 81 S HARBOR DR VERO BEACH FL 32980						
) 			
2. Principal F	Place of Business	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			™ CHE	CK HERE IF MAKIN	NG CHANGES	i
City & State		City & State			4. FEI Number 59-2385248			pplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of Status	Desired	\$8.75 Ad Fee Require	Iditional
	6. Name and Address of Curren	t Registered Agent			7. Name and Address	of New Registere	d Agent	
UEIG EDI	DERICK W		Name		· · · · · · · · · · · · · · · · · · ·			
81 S HAF	RBOR DR	- .	Street Address		P.O. Box Number is Not A	cceptable)		
AFHO RF	ACH FL 32960							
			City			F	- 1	
	named entity submits this statement ions of registered agent.	for the purpose of changing its re	egistered office or	registere	ed agent, or both, in the	State of Florida. I ar	n familiar with,	and accept
SIGNATURE .	Flederick Signature, typed or printed name of registered agen	W Decs	Registered Agent signatu	ire required s	when reinstating)	4/22/	03	
<u> </u>	, , , , , , , , , , , , , , , , , , ,	in data with a department.		ine required	witer rainataing)			
<u>.</u> .	FILE NOW: FEE IS \$61.25	9. Election Camp Trust Fund Col			\$5.00 May Be Added to Fees	Make Che Florida Depa	ck Payable artment of	
10.	OFFICERS AND D		11.		DDITIONS/CHANGES T	O OFFICERS AND	DIRECTORS IN	V 10
	VD MULIGAN, PATRICIA 162 SILVERY LANE	Delete	, TITLE Name	VD		-	Change	Addition §
			STREET ADDRESS	JUD 18 Van	ITH GILBER 5. HARBOI	2 DR	,	1
CITY-ST-ZIP	VERO BCH FL 32960	□ Delete	CITY-ST-ZIP	JUD 18 VER	ITH GILBER S. HARBOI D. BEACH, FL	2 DR 32960	Change	Addition
CITY-ST-ZIP TITLE NAME	VERO BCH FL 32960 TD DEIS, FREDERICK W	☐ Delete	CITY-ST-ZIP TITLE NAME	JUD 18 VER	ITH GILBER 5. HARBOI 20 BEACH, FL	E DR 32960	☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	VERO BCH FL 32960 TD DEIS, FREDERICK W 81 S HARBOR DR	☐ Delete	CITY-ST-ZIP TITLE	JUD 18 VER	IITH GILBER S. HARBOI D. BEACH, FL	E DR 32960	☐ Change	Addition E
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME " " "	VERO BCH FL 32960 TD DEIS, FREDERICK W 81 S HARBOR DR VERO BEACH FL 32960 PD HAYES, EDWARD 75 SOUTH HARBOR DR VERO BEACH FL 32960	▼ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD FRE JO VER	ED PAFENBA 5 CORAL LAI 80 BEACH, FL	CH VE 31960		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE TITLE TITLE TITLE	VERO BCH FL 32960 TD DEIS, FREDERICK W 81 S HARBOR DR VERO BEACH FL 32960 PD HAYES, EDWARD 75 SOUTH HARBOR DR VERO BEACH FL 32960 VD		CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD FRE JO VER	ED PAFENBA 5 CORAL LAI 80 BEACH, FL	CH VE 31960		
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CITY-ST-ZIP TITLE NAME STREET ADDRESS	VERO BCH FL 32960 TD DEIS, FREDERICK W 81 S HARBOR DR VERO BEACH FL 32960 PD HAYES, EDWARD 75 SOUTH HARBOR DR VERO BEACH FL 32960 VD NIEBUHR, HILDE 120 SILVERY LANE VERO BCH FL 32960 SD BEAKBANE, GINETTE 141 FLORA LANE	Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD FRED VER VOICE VER SOLLANDING	ED PAFENBA 5 CORAL LAI 20 BEACH, FL BERT EWRY 7 CORAL LA 20 BEACH, FL LORED SNYL 5 HARBOR	CH VE 31960 NE 1 32960 DER DR	. Change	✓ Addition ✓ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VERO BCH FL 32960 TD DEIS, FREDERICK W 81 S HARBOR DR VERO BEACH FL 32960 PD HAYES, EDWARD 75 SOUTH HARBOR DR VERO BEACH FL 32960 VD NIEBUHR, HILDE 120 SILVERY LANE VERO BCH FL 32960 SD BEAKBANE, GINETTE	Delete Delete Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FRED VER VOICE VER SOLLANDING	ED PAFENBA 5 CORAL LAI 70 BEACH, FL BERT EWRY 7 CORAL LA 80 BEACH, FL	CH VE 31960 NE 1 32960 DER DR	Change Change	✓ Addition Addition
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Thereby certify that the information supplied with this filing does not qualify 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 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:

712-564-8460