

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747947

FILED
Mar 19, 2009
Secretary of State

Entity Name: FAIRWAYS FOUR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2100 GOLF ISLE DRIVE
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

2100 GOLF ISLE DRIVE
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 59-1961346

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULRENNAN, JAMES JOSEPH
2230 GOLF ISLE DRIVE UNIT
704
MELBOURNE, FL 32935 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: MURRAY, PAUL
Address: 2245 GOLF ISLE #411
City-St-Zip: MELBOURNE, FL 32935

Title: SD () Delete
Name: MILLER, DENISE
Address: 2201 GOLF ISLE #824
City-St-Zip: MELBOURNE, FL 32935

Title: VP () Delete
Name: MOMMERS, ERIKA
Address: 2145 GOLF ISLE DRIVE UNIT 1221
City-St-Zip: MELBOURNE, FL 32935

Title: TD () Delete
Name: MULRENNAN, JAMES
Address: 2230 GOLF ISLE #714
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: OLIVER, SHERRY
Address: 2175 GOLF ISLE DRIVE #1011
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DONALD, GERBER
Address: 2250 GOLF ISLE DRIVE #501
City-St-Zip: MELBOURNE, FL 32935

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: JAMES JOSEPH MULRENNAN

TD

03/19/2009

Electronic Signature of Signing Officer or Director

Date