

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748173

FILED
Feb 04, 2012
Secretary of State

Entity Name: FAIRGREEN UNIT V OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8 GRACE DR.
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

8 GRACE DR.
P.O. BOX 1335
NEW SMYRNA BEACH, FL 32170

New Mailing Address:

FEI Number: 59-1936141 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SYLVIA BAUER
8 GRACE DR.
NEW SMYRNA BEACH, FL 32168 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: SD
Name: WOLF, SHARON
Address: 7 BOGEY CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: P
Name: JEFF, CHRISTMAN
Address: 51 BOGEY CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: TD
Name: BAUER, SYLVIA
Address: 8 GRACE DR.
City-St-Zip: NEW SMYRNA BEACH, FL

Title: D
Name: CARPENTER, SHIRLEY
Address: 44 BOGEY CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D
Name: ALLEN, YVONNE
Address: 37 BOGEY CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VD
Name: MILLS, BARBARA
Address: 8 BOGEY CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: SYLVIA BAUER

TD

02/04/2012

Electronic Signature of Signing Officer or Director

Date