


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

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**FILED**  
**Mar 14, 2008 8:00 am**  
**Secretary of State**

02-11-2008 90059 009 \*\*\*\*61.25

<b>DOCUMENT # 749319</b>			
1. Entity Name <b>FAIRGREEN UNIT VI OWNERS ASSOCIATION, INC.</b>			
Principal Place of Business P.O. BOX 2665 NEW SMYRNA BEACH, FL 32170		Mailing Address P.O. BOX 2665 NEW SMYRNA BEACH, FL 32170	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-1971601		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
STRONG, LOIS A 105 GOLF CLUB DR NEW SMYRNA BEACH, FL 32168		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and except the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and state if applicable. NOTE: Registered Agent signature required when reappointing.</small>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JODOIN, RICHARD 100 LAKE FAIRGREEN CIRCLE NEW SMYRNA BEACH, FL 32168 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Charbonneau, Edward <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 133 Lake Fairgreen Circle New Smyrna Beach FL 32168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CALDWELL, JAMES 102 GOLF CLUB DR NEW SMYRNA BEACH, FL 32168 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Greene, Donna <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 97 Lake Fairgreen Circle New Smyrna Beach FL 32168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WINCHESTER, SLYMA L <input checked="" type="checkbox"/> Delete 45 LAKE FAIRGREEN CIRCLE NEW SMYRNA BEACH, FL 32168	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jones, George G <input type="checkbox"/> Change <input type="checkbox"/> Addition 89 Lake Fairgreen Circle New Smyrna Beach FL 32168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T STRONG, LOIS A <input type="checkbox"/> Delete 105 GOLF CLUB DR NEW SMYRNA BEACH, FL 32168	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAUSCH, JANELLE <input checked="" type="checkbox"/> Delete 2 LAKE FAIRGREEN CIRCLE NEW SMYRNA BEACH, FL 32168	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAUKNECHT, FRED <input type="checkbox"/> Delete 39 LAKE FAIRGREEN CIRCLE NEW SMYRNA BEACH, FL 32168	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Lois Anne Strong</u>		Date: <u>2/8/08</u> Phone: <u>386-428-2084</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SECRETARY, OFFICER OR DIRECTOR</small>		<small>Date Phone</small>	

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