FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 27 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

SIGNATURE:

749390

(1)

FAIRWAY VILLAS PROPERTY OWNERS' ASSOCIATION, INC

•					
Principal Place of Business		Mailing Address			EGU BIRIH BIBNI DIDIN DIBNI DUBUN GIBUN 1881
5640 MASHIE CIRCLE NORTH PORT FL 34287		5640 MASHIE CIRCLE NORTH PORT FL 34287-3129			
				3. Date Incorporated or Qualified 10/18/1979	3a. Date of Last Report 04/08/1996
21	ace of Business	2a. Mailing Address 26		4. FEI Number 59-2112217	Applied For Not Applicable
Suite, Apt. #		Sulte, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State		City & State	0	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζφ 24	Country 25 9. Name and Address of Current		Country	8. This corporation has liability for in Florida Statutes 10. Name and Address of New Re	Yes No
	y. Haine and Address of Culterio	P TO Name and Address of New He	Sieratan Wilaur		
RAILEV	DODIS.		81 Name	Robert Cochrane	
BAILEY, DORIS 5948 NIBLICK CR			82 Street A	ddress (P.O. Box Number is Not Acceptable 5701 Niblick Cr.	ole)
5640 MASHIE CIRCLE			63		
	FL 34287		84 City	North Port, FL 342	FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE RAM D. (Vulnam)					
Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS II 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	XXX D	DELETE	1.1 TITLE	V.P.	Change Addition
NAME	GEBBEN, NELSON	-	1.2 NAME	Jane Brown	
STREET ADDRESS	5541 NIBLICK CIR		1.3 STREET ADDRESS	5585 Brassy Cir.	
CITY-ST-ZIP	NORTH PORT FL		1.4 CITY+ST-ZIP	North Port, FL 342	07
1/TLF	D	XX DELETE	2.1 YITLE	•	☐ Change 💢 Addition
NAME	GEBBEN, NELSON		2.2 NAME	Secretary	· ·
STREET ADDRESS	5541 NIBLICK CR		2.3 STREET ADDRESS	Charlene Coffey	
C(TY - ST - Z(F)	N PORT FL		2. 4 CITY-ST-ZIP	5757 Mashie Cir.	N.P. 34287
TITLE	VP	XXDELETE	31 TITLE	Treas.	Change 🔀 Addition
NAME	BROADHURST, JACKIE		3.2 NAME	Laura Dietch	
STREET ADDRESS	5625 MASHIE CR		3.3 STREET ADDRESS	5801 Mashie Cir.	
DITY - ST - ZIP	N PORT FL	30 To A DELETE	3.4. CITY-ST-ZIP	N.P. 34287	Change Addition
TITLE	D COUNTY TOCKON	XXXDELETE	4.1 TITLE	Director	C Change L Addition
NAME	GRONDIN, JOSEPH 5700 NIBLICK CIR		4. 2 NAME	Harry Gerken	
STREET ADDRESS	NO PORT FL		4.3 STREET ADDRESS	5784 Niblick Cir.	
CITY-ST-ZIP TITLE	SD	XXXDELETE	4.4 CITY - ST - ZIP 5.1 TITLE	N.P. 34287 President	Change Addition
NAME	BAILEY, DORIS	Traper	5.2 NAME	Robert Cochrane	THE COLUMN TO SERVICE AND ADDRESS OF THE SERVICE
STREET ADDRESS	5948 NIBLICK CIR		5.3 STREET ADDRESS	5701 Niblick Circ	16
CITY-ST-ZIP	NORTHPORT FL		5.4 CITY-ST-ZIP	North Port, FL 34	
TITLE	8 D	DELETE	6.1 TITLE	110000000000000000000000000000000000000	Change Addition
NAME	DEHAVEN, BARBARA		6.2 NAME		
STREET ADDRESS	5301 BRASSY CR		6.3 STREET ADDRESS		'
CITY-ST-ZIP	N PORT FL		6.4 CITY-ST-ZIP		

14. I do hereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.