2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State
05-17-2001 91364 047 ****61.25

DOCUMENT # 749897

1. Entity Name

WEKIVA FAIRWAY TOWNHOMES CONDOMINIUM ASSOCIATION

Principal Place of Business	Mailing Address
225 SOUTH WESTMONTE DRIVE SUITE 2050 ALTAMONTE SPRINGS FL 32714 US	225 SOUTH WESTMONTE DRIVE SUITE 2050 ALTAMONTE SPRINGS FL 32714 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	P.O. Box 161606 Suite, Apt. #, etc.
City & State	City & State: Altamonte Springs, FL
Zip / Country	Zip: 32816-1606 / Country: USA

4. FEI Number 59-1972363 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WOMACK, ELLEN R. 225 SOUTH WESTMONTE DRIVE SUITE 2050 ALTAMONTE SPRINGS FL 32714	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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DUNFEE, NANCY 1953 ST. ANDREWS PL. LONGWOOD FL	X☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP Sue Jordan 1946 St. Andrews Place Longwood, FL 32779	☐ Change X☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KRAFT, FRANK 103 ROCKINGHAM COURT LONGWOOD FL 32779	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST Karen Jenkins 1957 St. Andrews Place Longwood, FL 32779	☐ Change X☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VP BRENNAN, ED 1946 ST. ANDREWS PLACE LONGWOOD FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Joe Talbot 1995 St. Andrews Place Longwood, FL 32779	☐ Change X☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SYLVESTER, TRACY 1886 ST. ANDREWS PLACE LONGWOOD FL 32779	X☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST CHASTAIN, DENNIS 1982 ST. ANDREWS PLACE LONGWOOD FL 32779	X☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

12. I 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 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: SIGNATURE REQUIRED 5-11-1