2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2006
Secretary of State

DOCUMENT# 749897

Entity Name: WEKIVA FAIRWAY TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

225 SOUTH WESTMONTE DRIVE
SUITE 3310
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 162147
ALTAMONTE SPRINGS, FL 327162147 US

New Mailing Address:

FEI Number: 59-1972363 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOMACK, ELLEN R.
225 SOUTH WESTMONTE DRIVE
SUITE 3310
ALTAMONTE SPRINGS, FL 32714 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: DVP ( ) Delete
Name: KRAFT, FRANK
Address: 103 ROCKINGHAM COURT
City-St-Zip: LONGWOOD, FL 32779

Title: DP ( ) Delete
Name: STRAUSS, LEON
Address: 1964 ST ANDREWS PLACE
City-St-Zip: LONGWOOD, FL 32779

Title: DT ( ) Delete
Name: QUIGLEY, BRYAN J
Address: 1866 ST. ANDREWS PLACE
City-St-Zip: LONGWOOD, FL

Title: DS ( ) Delete
Name: WIEGAND, CARROL F
Address: 1935 ST ANDREWS PLACE
City-St-Zip: LONGWOOD, FL 32779

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: DS (X) Change ( ) Addition
Name: PRAST, MARY K
Address: 1966 ST ANDREWS PLACE
City-St-Zip: LONGWOOD, FL 32779

I hereby certify that the information supplied with this filing does not qualify for the 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: ELLEN WOMACK A 02/22/2006

Electronic Signature of Signing Officer or Director — Date