

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 08, 2011
Secretary of State

DOCUMENT# 762064

Entity Name: LAKE FAIRWAYS ESTATES HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**9411 CYPRESS LAKE DR
SUITE 2
FORT MYERS, FL 33919 US**New Principal Place of Business:****Current Mailing Address:**9411 CYPRESS LAKE DR
SUITE 2
FORT MYERS, FL 33919 US**New Mailing Address:****FEI Number:** 59-2173323 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GELLES, ROBERT
9411 CYPRESS LAKE DR
NORTH FT MYERS, FL 33919 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:** P
Name: EMANUELE, ELAINE
Address: 19279 PONY LANE
City-St-Zip: NORTH FT MYERS, FL 33903**Title:** VP
Name: FRANTZ, ED
Address: 19260 ARROW HEAD
City-St-Zip: NORTH FORT MYERS, FL 33903**Title:** TR
Name: GRAYSON, WES
Address: 9835 LAKE FAIRWAYS BLVD
City-St-Zip: NORTH FORT MYERS, FL 33903**Title:** S
Name: BATY, NANCY
Address: 9804 LAKE FAIRWAYS BLVD
City-St-Zip: NORTH FORT MYERS, FL 33903

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: ROBERT E. GELLES

RA

11/08/2011

Electronic Signature of Signing Officer or Director

Date