

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F07000003888

FILED
Oct 13, 2009
Secretary of State

Entity Name: FAIRVIEW SETTLEMENT SERVICES, INC.

Current Principal Place of Business:

3900 WOODLAKE BLVD, SUITE 201
GREEN ACRES, FL 33463

New Principal Place of Business:

4475 MARINERS COVE DRIVE
WELLINGTON, FL 33467

Current Mailing Address:

18 FAIRVIEW STREET
HUNTINGTON, NY 11743

New Mailing Address:

FEI Number: 20-5743520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERCOLE, JOSEPH
3900 WOODLAKE BLVD, SUITE 201
GREEN ACRES, FL 33463 US

Name and Address of New Registered Agent:

ERCOLE, JOSEPH
4475 MARINERS COVE DRIVE
WELLINGTON, FL 33467 US

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: JOSEPH ERCOLE

10/13/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: GIACHETTI, FREDERICK J
Address: 18 FAIRVIEW STREET
City-St-Zip: HUNTING, NY 11743

Title: VCVP () Delete
Name: GIACOPPI, JOHN R
Address: 18 FAIRVIEW STREET
City-St-Zip: HUNTING, NY 11743

Title: S () Delete
Name: ERCOLE, JOSEPH
Address: 3900 WOODLAKE BLVD, SUITE 201
City-St-Zip: GREEN ACRES, FL 33463

Title: T () Delete
Name: GIACHETTI, LISA
Address: 18 FAIRVIEW STREET
City-St-Zip: HUNTINGTON, N7 11743

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: GIACHETTI, FREDERICK J
Address: 18 FAIRVIEW STREET
City-St-Zip: HUNTINGTON, NY 11743

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: ERCOLE, JOSEPH
Address: 4475 MARINERS COVE DRIVE
City-St-Zip: WELLINGTON, FL 33467

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH ERCOLE

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10/13/2009

Electronic Signature of Signing Officer or Director

Date