

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90409 017 \*\*\*150.00

<b>DOCUMENT # M85821</b> 1. Entity Name <b>FAIRHAVEN RESIDENTS ASSOCIATION, INC.</b>			
Principal Place of Business <b>5757 66 ST N.</b> <b>LOT 211 LOT 13</b> <b>ST. PETERSBURG, FL 33709 US</b>		Mailing Address <b>5757 66 ST N.</b> <b>LOT 211 LOT 13</b> <b>ST. PETERSBURG, FL 33709 US</b>	
2. Principal Place of Business <b>5757 66th ST. N</b> Suite, Apt. #, etc. <b>FAIRHAVEN mobile PARK</b>		3. Mailing Address <b>5757 66th ST. N</b> Suite, Apt. #, etc. <b>LOT # 13</b>	
City & State <b>ST. PETERSBURG FL</b>		City & State <b>ST. PETERSBURG FL</b>	
Zip <b>33709</b>		Zip <b>33709</b>	
Country <b>FLORIDA</b>		Country <b>FLORIDA</b>	
4. FEI Number <b>59-2899250</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <del>LEE HEAD, NANCY</del> <b>Linda GUERIN</b> <b>5757 66TH STREET NORTH</b> <b>LOT 211 LOT # 13</b> <b>SAINT PETERSBURG, FL 33709</b>		7. Name and Address of New Registered Agent Name <b>Linda GUERIN</b> Street Address (P.O. Box Number is Not Acceptable) <b>5757 66th ST NORTH LOT 13</b> City <b>SAINT PETERSBURG FL</b> Zip Code <b>33709</b>	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Linda Guerin Linda GUERIN (TREASURER) 4/26/05</u> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SLACK, ED <input type="checkbox"/> Delete 5757 66TH STREET NORTH LOT 190 SAINT PETERSBURG, FL 33709	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	D SLACK, ED 5757 66TH STREET NORTH LOT 190 ST PETERSBURG, FL 33709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRD LEE HEAD, NANCY <input checked="" type="checkbox"/> Delete 5757 66TH STREET NORTH LOT 211 SAINT PETERSBURG, FL 33709	TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	TAD GUERIN, LINDA 5757 66th ST NORTH LOT 13 SAINT PETERSBURG FL 33709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DASILVA, KATHY <input checked="" type="checkbox"/> Delete 5757 66TH STREET NORTH LOT 154 SAINT PETERSBURG, FL 33709	TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	P CLAPP KATHY A. 5757 66th ST NORTH LOT 150 SAINT PETERSBURG FL 33709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'CONNELL, JOHN <input checked="" type="checkbox"/> Delete 5757 66TH STREET NORTH LOT 214 SAINT PETERSBURG, FL 33709	TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	D MCVANE MARYLOU 5757 66th ST NORTH LOT 171 SAINT PETERSBURG FL 33709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARD, BOB <input checked="" type="checkbox"/> Delete 5757 66TH STREET NORTH LOT 101 SAINT PETERSBURG, FL 33709	TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	V PALMER, LORRAINE 5757 66th ST NORTH SAINT PETERSBURG, FL 33709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANGELY, PHIL <input checked="" type="checkbox"/> Delete 5757 66TH ST. N. LOT 138 ST. PETERSBURG, FL	TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	S Smith, Kathy 5757 66th ST NORTH LOT 29 SAINT PETERSBURG FL 33709
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 607, 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: <u>Linda Guerin Linda GUERIN 4/26/05 (727) 545-2376</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			

Addition SEE SECOND PAGE

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

Attachment (2)

<b>DOCUMENT # M85821</b> 1. Entry Name <b>FAIRHAVEN RESIDENTS ASSOCIATION, INC.</b>					
Principal Place of Business <b>5757 66 ST. N. LOT 211 LOT 13 ST. PETERSBURG, FL 33709 US</b>			Mailing Address <b>5757 66 ST. N. LOT 211 LOT 13 ST. PETERSBURG, FL 33709 US</b>		
2. Principal Place of Business <b>5757 66th ST. N</b> Suite, Apt. #, etc. <b>FAIRHAVEN MOBILE PARK</b> City & State <b>ST. PETERSBURG FL</b> Zip <b>33709</b> Country <b>Pinellas</b>		3. Mailing Address <b>5757 66th ST. N</b> Suite, Apt. #, etc. <b>LOT #13</b> City & State <b>ST. PETERSBURG FL</b> Zip <b>33709</b> Country <b>Pinellas</b>		<p style="font-size: 1.5em; font-family: cursive;">#14013984</p> <div style="background-color: black; width: 200px; height: 30px; margin: 0 auto;"></div>	
4. FEI Number <b>59-2899250</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				02232005 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent  <b>LEE HEAD, NANCY Linda Guerin</b> <b>5757 66TH STREET NORTH</b> <b>LOT 211 LOT # 13</b> <b>SAINT PETERSBURG, FL 33709</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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. I am familiar with, and accept the obligation of registered agent. SIGNATURE <u>Linda Guerin (TREASURER) Linda Guerin</u> <span style="float: right;">4/26/05</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SLACK, ED 5757 66TH STREET NORTH LOT 190 SAINT PETERSBURG, FL 33709	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Engle, Sally 5757 66th ST NORTH LOT #217 SAINT PETERSBURG FL 33709	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRD LEE HEAD, NANCY 5757 66TH STREET NORTH LOT 211 SAINT PETERSBURG, FL 33709	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hashey Jr, FRED 5757 66th ST NORTH LOT #39 SAINT PETERSBURG FL 33709	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DASILVA, KATHY 5757 66TH STREET NORTH LOT 154 SAINT PETERSBURG, FL 33709	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'CONNELL JANET 5757 66th ST NORTH LOT 58 SAINT PETERSBURG FL 33709	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'CONNELL, JOHN 5757 66TH STREET NORTH LOT 214 SAINT PETERSBURG, FL 33709	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARD, BOB 5757 66TH STREET NORTH LOT 101 SAINT PETERSBURG, FL 33709	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANGELY, PHIL 5757 66TH ST. N. LOT 138 ST. PETERSBURG, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 607, 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: <u>Linda Guerin Linda Guerin</u> <span style="float: right;">4/26/05 (727) 545-2376</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					