

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00227

FILED
Jan 09, 2009
Secretary of State

Entity Name: FAIRWAYS AT BURNT STORE ASSOCIATION, INC.

Current Principal Place of Business:

3919 SAN ROCCO DRIVE
UNIT 33B
PUNTA GORDA, FL 33950 US

New Principal Place of Business:

Current Mailing Address:

3919 SAN ROCCO DRIVE
UNIT 33B
PUNTA GORDA, FL 33950 US

New Mailing Address:

FEI Number: 59-2519465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERRISFORD, ERNEST DR
3919 SAN ROCCO DRIVE
APT 33-B
PUNTA GORDA, FL 33950 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 () Delete
Name: BERRISFORD, ERNEST DR
Address: 3919 SAN ROCCO DR #33B
City-St-Zip: PUNTA GORDA, FL 33950

Title: ST () Delete
Name: HAMILTON, ANITTA
Address: 3919 SAN ROCCO 31A
City-St-Zip: PUNTA GORDA, FL 33950

Title: CD () Delete
Name: SANDERS, JR, JAMES
Address: 3930 ST KITTS CT
City-St-Zip: PUNTA GORDA, FL 33950

Title: D () Delete
Name: SCHREIER, PASCAL
Address: 21245 COACHMAN AVE.
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D () Delete
Name: PETERS, ERNEST
Address: 839 PHEASANT RUN
City-St-Zip: WEST CHESTER, PA 19382

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DR. ERNEST BERRISFORD

P

01/09/2009

Electronic Signature of Signing Officer or Director

Date