

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003413

FILED
Feb 22, 2006
Secretary of State

Entity Name: FAIRWAY ISLES AT BAYSIDE LAKES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

770 NORTH DRIVE
SUITE
MELBOURNE, FL 329349270

New Principal Place of Business:

Current Mailing Address:

770 NORTH DRIVE
SUITE
MELBOURNE, FL 329349270

New Mailing Address:

FEI Number: 59-3685782

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEFFERIES, BENJAMIN E
3391 BAYSIDE LAKES BLVD. SE
PALM BAY, FL 32909 US

Name and Address of New Registered Agent:

JEFFERIES, BENJAMIN E
770 NORTH DRIVE
SUITE A
MELBOURNE, FL 32934 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: BENJAMIN E JEFFERIES

02/22/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JEFFERIES, BENJAMIN E
Address: 3391 BAYSIDE LAKES BLVD., SE
City-St-Zip: PALM BAY, FL 32909

Title: D () Delete
Name: THOMPSON, RONALD
Address: 3391 BAYSIDE LAKES BLVD., SE
City-St-Zip: PALM BAY, FL 32909

Title: D () Delete
Name: FACCIOBENE, FRANK
Address: 601 W EDGEWOOD DRIVE
City-St-Zip: MELBOURNE, FL 32901

Title: VDS () Delete
Name: GOATLEY, COLEMAN
Address: 3391 BAYSIDE LAKES BLVD. SE
City-St-Zip: PALM BAY, FL 32909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JEFFERIES, BENJAMIN E
Address: 770 NORTH DRIVE SUITE A
City-St-Zip: MELBOURNE, FL 32934

Title: D (X) Change () Addition
Name: THOMPSON, RONALD
Address: 770 NORTH DRIVE SUITE A
City-St-Zip: MELBOURNE, FL 32934

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

Title: VDS (X) Change () Addition
Name: GOATLEY, COLEMAN
Address: 770 NORTH DRIVE SUITE A
City-St-Zip: MELBOURNE, FL 32934

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: BENJAMIN E JEFFERIES

PD

02/22/2006

Electronic Signature of Signing Officer or Director

Date