## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000007152

FILED Apr 30, 2005 Secretary of State

Entity Name: FAIRWAYS EDGE AT LA CITA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

516 DELANNOY AVE. FAIRWAYS EDGE AT LA CITA HOMEOWNERS ASSOCI

COCOA, FL 32922 TITUSVILLE, FL 32780

Current Mailing Address: New Mailing Address:

P.O. BOX 3767 3804 WOODHAVEN COURT COCOA, FL 32924 TITUSVILLE, FL 32796

FEI Number: 20-0890855 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KIRSCHENBAUM, MALCOLM R
516 DELANNOY AVE
COCOA, FL 32922 US

JANKOVICH, SANDRA L P
3804 WOODHAVEN CT.
TITUSVILLE, FL 32796 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: SANDRA L. JANKOVICH 04/30/2005

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition
Name: KIRSCHENBAUM, MALCOLM R Name: JANKOVICH, SANDRA L P

 Address:
 P.O. BOX 3767
 Address:
 3804 WOODHAVEN COURT

 City-St-Zip:
 COCOA, FL 32924
 City-St-Zip:
 TITUSVILLE, FL 32796

Title: V ( ) Delete Title: VP (X) Change ( ) Addition

Name: MCDANIEL, LARRY Name: TORRES, DAWN L VP
Address: P.O. BOX 3767 Address: HELENA DRIVE

Address: P.O. BOX 3767 Address: HELENA DRIVE
City-St-Zip: COCOA, FL 32924 City-St-Zip: TITUSVILLE, FL 32780

Title: () Delete Title: (X) Change ( ) Addition VINCENT, LYNDA Name: SCOPELITS, ROBERT ST Name: P.O. BOX 3767 3640 BELLE ARBOR COURT Address: Address: City-St-Zip: COCOA, FL 32924 City-St-Zip: TITUSVILLE, FL 32780

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SANDRA JANKOVICH P 04/30/2005