

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002318

FILED  
Apr 25, 2006  
Secretary of State

**Entity Name:** THE VILLAS OF FAIRWAY TERRACE, INC.

**Current Principal Place of Business:**

14815 CARDUCCI CT  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

14815 CARDUCCI CT  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

**FEI Number:** 75-3115887

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARAN, MARK D  
14815 CARDUCCI CT.  
BONITA SPRINGS, FL 34135 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: D ( ) Delete  
Name: MARAN, MARK D  
Address: 14815 CARDUCCI CT.  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D ( ) Delete  
Name: JAKSTCH, NICHOLAS M  
Address: 760 STARBOARD DR  
City-St-Zip: NAPLES, FL 34103

Title: D ( ) Delete  
Name: WACHOWICZ, GERALD E  
Address: 2400 WINDWARD WAY  
City-St-Zip: NAPLES, FL 34103

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: JAKSICH, NICHOLAS M  
Address: 760 STARBOARD DR  
City-St-Zip: NAPLES, FL 34103

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

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: MARK D. MARAN

D

04/25/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date