

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 06, 2003 8:00 A.M.
Secretary of State

DOCUMENT # **N03000002318**
1. Entity Name
The Villas of Fairway Terrace, Inc.



DO NOT WRITE IN THIS SPACE

10103938

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2. Principal Place of Business
5125 Castello Dr.
Suite, Apt. #, etc.
City & State
NAPLES, FL.
Zip
34103 Country

3. Mailing Address
5125 Castello Dr.
Suite, Apt. #, etc.
City & State
NAPLES, FL.
Zip
34103 Country

4. FEI Number
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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6. Name and Address of Current Registered Agent
Name
Mark D. Maran
Street Address (P.O. Box Number is Not Acceptable)
5125 Castello Dr.
City
NAPLES FL 34103

8. The above named entity permits 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 **[Signature]** (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	TITLE	NAME
MARK D. MARAN	5125 CASTELLO DR. NAPLES, FL. 34103		
NICHOLAS M. JAKSCH	760 STARBOARD DR. NAPLES, FL. 34103		
GERALD WACHOWICZ	2400 HINDWARD WAY NAPLES, FL. 34103		

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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 617, Florida Statutes, and that my name appears in Block 10 or on an attachment with an address, with all other like empowers.

SIGNATURE: **[Signature]** 5/8/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR