

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 14, 2006 8:00 am
Secretary of State

08-02-2006 90002 042 ****61.25

DOCUMENT # N05000002344

1. Entity Name
**PARADISE VILLAS OF HOLMES BEACH CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
**6925 LAKE EAGLEBROOK DRIVE
LAKELAND, FL 33813**

Mailing Address
**6925 LAKE EAGLEBROOK DRIVE
LAKELAND, FL 33813**

66023021



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07032006

Chg-NP

CR2E037 (4/06)

City & State

City & State

4. FEI Number

Applied For

☒ Not Applicable

Zip

Country

Zip

Country

8. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FAIRCHILD, LARRY
6925 LAKE EAGLEBROOK DRIVE
LAKELAND, FL 33813**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

**Filing Fee is \$61.25
Due by September 6, 2006**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D**
NAME **FAIRCHILD, LARRY - President** ☒ Delete
STREET ADDRESS **6925 LAKE EAGLEBROOK DRIVE**
CITY- ST- ZIP **LAKELAND, FL 33813**

TITLE ☐ Change ☐ Addition
NAME **John Lawrence Brosnick - Director**
STREET ADDRESS **305-B 63rd St.**
CITY- ST- ZIP **Holmes Beach, FL 34217**

TITLE **D**
NAME **FAIRCHILD, SUSAN - Director** ☒ Delete
STREET ADDRESS **6925 LAKE EAGLEBROOK DRIVE**
CITY- ST- ZIP **LAKELAND, FL 33813**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE **D**
NAME **FAIRCHILD, ERIC - Director** ☒ Delete
STREET ADDRESS **6925 LAKE EAGLEBROOK DRIVE**
CITY- ST- ZIP **LAKELAND, FL 33813**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 30, 2006

Daytime Phone #