## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000004672

FILED Apr 02, 2010 Secretary of State

Entity Name: THE HOMEOWNERS' ASSOCIATION OF LAKE FAIRWAYS, INC.

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

10000 LAKEWOOD SHORES CIRCLE NO. FT. MYERS, FL 33903

Current Mailing Address: New Mailing Address:

10000 LAKEWOOD SHORES CIRCLE NO. FT. MYERS, FL 33903

FEI Number: 56-2564344 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

COLLING, LEE J 529 VERSAILLES DRIVE SUITE 103 MAITLAND, FL 32751 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:

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

Title: PD

Name: WILKINSON, RICHARD W
Address: 19100 GRENELEFE COURT
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: VP

Name: HAYES, JAMES

Address: 19153 INNIS BROOK COURT City-St-Zip: NORTH FORT MYERS, FL 33903

Title: SD

 Name:
 DECKER, MARY ANN

 Address:
 19156 GRENELEFE COURT

 City-St-Zip:
 NORTH FORT MYERS, FL 33903

Title:

Name: BERGER, BUD

Address: 19452 BERMUDA COURT City-St-Zip: NO. FT. MYERS, FL 33903

Title: TE

Name: GREGG, CARL

Address: 10726 LAKEWOOD SHORES CIRCLE

City-St-Zip: NO. FT. MYERS, FL 33903

Title:

Name: RICHARDS, BILL

Address: 19228 TUCKAWAY COURT City-St-Zip: NO. FT. MYERS, FL 33903

I hereby 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 all other like empowered.

SIGNATURE: RICHARD W. WILKINSON PRES 04/02/2010