

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010066

FILED
Feb 07, 2009
Secretary of State

Entity Name: FAIRWAY GREENS OF PEMBROKE PINES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11606 NW 19 DRIVE
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

11606 NW 19 DRIVE
CORAL SPRINGS, FL 33071

New Mailing Address:

PO BOX 770850
CORAL SPRINGS, FL 33077

FEI Number: 20-3979449

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARVO & EMERY, P.A.
CARYN GOLDBERG CARVO, ESQ.
888 S. ANDREWS AVENUE, SUITE 201
FT. LAUDERDALE, FL 33316 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: ESTRADA, OLGA
Address: 350 SW 113 WAY
City-St-Zip: PEMBROKE PINES, FL 33025

Title: S (X) Delete
Name: PUIGS, ROLANDO
Address: 221 SW 113TH WAY
City-St-Zip: PEMBROKE PINES, FL 33025

Title: P () Delete
Name: FINK, ALBERT JR
Address: 215 SW 113 WAY
City-St-Zip: PEMBOKE PINES, FL 33025

Title: T (X) Delete
Name: RAMIREZ, RAMON
Address: 245 SW 113TH WAY
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VP () Delete
Name: BEERMAN, DAVID
Address: 211 SW 113TH WAY
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: ARDOIS, MARK
Address: 455 SW 113 WAY
City-St-Zip: PEMBROKE PINES, FL 33025

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

Title: P/S (X) Change () Addition
Name: FINK, ALBERT JR
Address: 215 SW 113 WAY
City-St-Zip: PEMBOKE PINES, FL 33025

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

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

I hereby certify that the information supplied with this filing does not qualify 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: ALBERT FINK

P

02/07/2009

Electronic Signature of Signing Officer or Director

Date