2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005770

Entity Name: FAIRFIELD VILLAGE H.O.A., INC.

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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5912 SW 57TH PLACE 5912 SW 57TH PLACE OCALA, FL 34474 US

Current Mailing Address: New Mailing Address:

5912 SW 57TH PLACE 5912 SW 57TH PL OCALA, FL 34474 US

FEI Number: 02-1240441 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

RICH, BARTON 5912 SW 57TH PLACE OCALA, FL 34474 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT () Delete Title: DT (X) Change () Addition Name: KULAH, CAROL Name: KULAH, CAROL

Address: 6001 SW 57TH CT Address: 6001 SW 57TH CT City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474 US

Title: DS () Delete Title: DS (X) Change () Addition Name: POLERY, NORMA Name: POWERS, NORMA

 Name
 FOLERY, NORMA

 Address:
 5960 SW 57TH ST

 City-St-Zip:
 OCALA, FL 34474

 City-St-Zip:
 OCALA, FL 34474 US

Title: T () Delete Title: VP (X) Change () Addition Name: MIRANOA, GEORGE Name: PITTS, AL

Address: 5933 SW 60TH PL Address: 5974 SW 58TH PL City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474 US

 Name:
 SKALKA, BARBARA
 Name:
 SKALKA, BARBARA

 Address:
 5802 SW 57TH PL
 Address:
 5802 SW 57TH PL

 City-St-Zip:
 OCALA, FL 34474
 City-St-Zip:
 OCALA, FL 34474 US

 Name:
 COHEN, STAN
 Name:
 GEORGE, BRUNO

 Address:
 5922 SW 57TH PL
 Address:
 5842 SW 57TH PL

 City-St-Zip:
 OCALA, FL 34474
 City-St-Zip:
 OCALA, FL 34474 US

Title: Title: T () Change (X) Addition

 Name:
 Name:
 OUELETTE, DONALD

 Address:
 Address:
 5923 SW 57TH PL

 City-St-Zip:
 City-St-Zip:
 OCALA, FL 34474 US

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: BARTON RICH P 04/13/2009