

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14211

FILED
Apr 02, 2008
Secretary of State

Entity Name: FAIRWAY WOODS AT THE FOREST I CONDOMINIUM ASSOCIATION INC.

Current Principal Place of Business:

2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-2778369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC.
2180 W SR 434 STE 5000
LONGWOOD, FL 327795044 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: PD () Delete
Name: FULLEN, DAVE
Address: 16431 FAIRWAY WOODS DR. #104
City-St-Zip: FORT MYERS, FL 33908

Title: VPD () Delete
Name: DOUGLAS, MELVIN
Address: 1526 BURNING TREE CT
City-St-Zip: LISLE, IL 60532

Title: SD () Delete
Name: COHEN, SANDY
Address: 16410 FAIRWAY WOODS DR #402
City-St-Zip: FORT MYERS, FL 33908

Title: TD () Delete
Name: FRUTCHEY, DAVID
Address: 16341 FAIRWAY WOODS DR #304
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: SANTIANGELO, MICHAEL
Address: 4 N 287 DORAL DR
City-St-Zip: WEST CHICAGO, IL 60185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COHEN, SANFORD
Address: 16410 FAIRWAY WOODS DR #402
City-St-Zip: FORT MYERS, FL 33908

Title: VPD (X) Change () Addition
Name: GRAINGER, WAYNE
Address: 16341 FAIRWAY WOODS DR #301
City-St-Zip: FORT MYERS, FL 33908

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

Title: TD (X) Change () Addition
Name: DUFFIN, MARTI
Address: 16450 FAIRWAY WOODS DR #603
City-St-Zip: FORT MYERS, FL 33908

Title: D (X) Change () Addition
Name: SANTANGELO, MICHAEL
Address: 4 N 287 DORAL DR
City-St-Zip: WEST CHICAGO, IL 60185

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: SANFORD COHEN

PD

04/02/2008

Electronic Signature of Signing Officer or Director

Date