

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 31, 2009
Secretary of State**

DOCUMENT# N20457

Entity Name: FAIRFIELD'S BEACONWOOD ASSOCIATION, INC.

Current Principal Place of Business:

C/O PHOENIX MANAGEMENT
3082 JOG RD.
LAKE WORTH, FL 334672053 US

New Principal Place of Business:

Current Mailing Address:

C/O PHOENIX MANAGEMENT
3082 JOG RD.
LAKE WORTH, FL 334672053 US

New Mailing Address:

FEI Number: 59-2860100 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSENTHAL, DAVID, C
C/O PHOENIX MANAGEMENT INC
3082 JOG ROAD
LAKE WORTH, FL 33467 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: DS () Delete
Name: BERNSTEIN, JULES
Address: 8088 BURLINGTON COURT
City-St-Zip: LAKE WORTH, FL 33467

Title: PD () Delete
Name: MOGUL, HAROLD
Address: 8111 COVINGTON COURT
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: YEARY, FRANCINE
Address: 6104 BEACONWOOD ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: TD () Delete
Name: GENSLER, GERALD
Address: 6153 BEACONWOOD ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: MARINAN, BRIAN
Address: 6169 BEACONWOOD ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: VD () Delete
Name: MERTES, JACK
Address: 8120 COVINGTON CT
City-St-Zip: LAKE WORTH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: HAROLD MOGUL

PD

03/31/2009

Electronic Signature of Signing Officer or Director

_____ Date