

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20457

FILED
Apr 01, 2010
Secretary of State

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
Name: BERNSTEIN, JULES
Address: 8088 BURLINGTON COURT
City-St-Zip: LAKE WORTH, FL 33467

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

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

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

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

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

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: HAROLD MOGUL

PD

04/01/2010

Electronic Signature of Signing Officer or Director

_____ Date