

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22427

FILED
Jan 17, 2009
Secretary of State

Entity Name: FAIRWAY VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

26440 RAMPART BLVD SUITE 999
PUNTE GORDA, FL 33983

New Principal Place of Business:

26440 RAMPART BLVD SUITE 999
PUNTA GORDA, FL 33983

Current Mailing Address:

26440 RAMPART BLVD SUITE 999
PUNTE GORDA, FL 33983

New Mailing Address:

P.O. BOX 512216
PUNTA GORDA, FL 33951

FEI Number: 65-0041926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COSTA, RON
26410 RAMPART BLVD STE 712
PUNTA GORDA, FL 33983 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: P () Delete
Name: COSTA, RON
Address: 26410 RAMPART BLVD STE 712
City-St-Zip: PUNTA GORDA, FL 33983

Title: VP () Delete
Name: MCPHERSON, JOHN
Address: 26410 RAMPART BLVD STE 724
City-St-Zip: PORT CHARLOTTE, FL 33983

Title: D () Delete
Name: GORGAS, EILEEN
Address: 26410 RAMPART BLVD STE 711
City-St-Zip: PUNTA GORDA, FL 33983

Title: D () Delete
Name: CHURCH, TRUMAN
Address: 26430 RAMPART BLVD STE 512
City-St-Zip: PUNTA GORDA, FL 33983

Title: SD () Delete
Name: AQUILAR, PAM
Address: 264 N RAMPART BLVD, # 722
City-St-Zip: PUNTA GORDA, FL 33985

Title: T () Delete
Name: LEN, MILNER
Address: 26410 RAMPART, #714
City-St-Zip: PUNTA GORDA, FL 33983

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
Name:
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: RON COSTA

P

01/17/2009

Electronic Signature of Signing Officer or Director

_____ Date