ANNUAL REPORT

DOCUMENT # N22576

1. Entity Name
THE FAIRWAYS AT PINEBROOK OWNER'S
ASSOCIATION, INC.



FILED Jan 08, 2007 08:00 AM Secretary of State

Principal Place of Business

4480 FAIRWAYS BLVD. BRADENTON, FL 34209 Mailing Address

4480 FAIRWAYS BLVD. BRADENTON, FL 34209



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01042007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0123143 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HYMES, LUCILLE 4460 FAIRWAYS BLVD 507 BRADENTON FL 3420

NAME STREET ADDRESS CITY-ST-ZIP DO NOT WRITE IN THIS SPACE

BRAUEN	ON, FL 34209						
6. The above the obligat	named entity submits this statement for the pitions of registered agent.	urpose of changing its registere	ed office or re	gistered agent, or bo	oth, in the State of Flor	ide. I am familiar with, and a	ccept
SIGNATURE	Luciella O. Hy Signature, typed or printed name of registered agent angultide	mes Luci I applicable. (NOTE: Begistere		equired when reinstating)	es)	1/6/07 DATE	_
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees	U000005 01/09/07-8	78973 0051-006 61.25	<u> </u>
10.	OFFICERS AND DIREC	TORS		WAR OF THE	The william		(d)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HYMES, LUCILLE 4460 FAIRWAYS BLVD., 507 BRADENTON, FL 34209						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WOODS, DAVID 4460 FAIRWAYS BLVD., 401 BRADENTON, FL 34209						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PAPPAS, GEORGE 4460 FAIRWAYS BLVD. #202 BRADENTON, FL			DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MAVELLE, ROBERT H 4480 FAIRWAYS BLVD 101 BRADENTON, FL			IN	THIS SE	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD O'DRISCALL, MICHAEL 4480 FAIRWAYS BLVD 201 BRADENTON, FL 34209						
TITLE							19.60

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under path; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

	SIGNATURE:	Robert H. Thavely SKINATURE AND TYPED OR PRINTED NAME OF SEC	Robert H. Mavelle	1-6-07	941-7921225 Destine Phone #
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