

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24721

FILED
Apr 30, 2009
Secretary of State

Entity Name: 6 FAIRWAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1460 SAN CRISTOBAL
PUNTA GORDA, FL 33983

New Principal Place of Business:

Current Mailing Address:

PO BOX 7555
NORTH PORT, FL 34287 US

New Mailing Address:

PO BOX 7555
NORTH PORT, FL 34290 US

FEI Number: 65-0029230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BINDER, BRENDA S
1485 FITZGERALD ROAD
NORTH PORT, FL 34288 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: YURCHIS, JOHN
Address: 1452 SAN CRISTOBAL B-201
City-St-Zip: PUNTA GORDA, FL 33983

Title: DT () Delete
Name: WILLIAMS, JEANNE
Address: 1452 SAN CRISTOBAL B-103
City-St-Zip: PUNTA GORDA, FL 33983

Title: DP () Delete
Name: O'LEARY, JOHN
Address: 1470 SAN CRISTOBAL C201
City-St-Zip: PUNTA GORDA, FL 33983

Title: DVP () Delete
Name: BROUGH, MARGARET
Address: 1470 SAN CRISTOBAL, C102
City-St-Zip: PUNTA GORDA, FL 33983

Title: D () Delete
Name: COUGHLIN, DAVE
Address: 1460 SAN CRISTOBAL A103
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:

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: JOHN OLEARY

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date