

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 15, 2005
Secretary of State

DOCUMENT# N26324

Entity Name: FAIRFIELD'S ROCK CREEK ASSOCIATION, INC.**Current Principal Place of Business:**GABLE PROPERTY MGMT
STE 110
WESTON, FL 33331**New Principal Place of Business:**6351 ROCK CREEK DRIVE
LAKE WORTH, FL 33467**Current Mailing Address:**GABLE PROPERTY MGMT
STE 110
WESTON, FL 33331**New Mailing Address:**6351 ROCK CREEK DRIVE
LAKE WORTH, FL 33467**FEI Number:** 65-0067565**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GABLES PROPERTY MGMT
3300 CORPORATE AVE
SUITE 110
WESTON, FL 33331 US**Name and Address of New Registered Agent:**CARL SENCER, PRESIDENT
6351 ROCK CREEK DRIVE
LAKE WORTH, FL 33467 US

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: CARL SENCER

09/15/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SENCER, CARL
Address: 6351 ROCK CREEK DR.
City-St-Zip: LAKE WORTH, FL 33467

Title: SD () Delete
Name: SCHULTE, SERICA
Address: 6578 ROCKCREEK DR
City-St-Zip: LAKE WORTH, FL 33467

Title: VD () Delete
Name: LANZA, JOSEPH
Address: 6407 ROCK CREEK DR
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: SCHULTE, ERICA
Address: 6578 ROCKCREEK DR
City-St-Zip: LAKE WORTH, FL 33467

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARL SENCER

PD

09/15/2005

Electronic Signature of Signing Officer or Director

Date