


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2005 8:00 am
Secretary of State


05-03-2005 90157 012 ****70.00

| | |
|---|---|
| DOCUMENT # N26820 |  |
| 1. Entity Name FAIRWAY BEND HOMEOWNERS' ASSOCIATION, INC. | |

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| Principal Place of Business 21045 COMMERCIAL TR BOCA RATON FL 33486 US | Mailing Address 21045 COMMERCIAL TR BOCA RATON FL 33486 US |
|--|--|

| | | | |
|---------------------------------------|---------|---------------------------|---------|
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

20054300



1st MOORE CR2E037 (10/04)

| | |
|--|---|
| 4. FEI Number 65-0106972 | <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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| 6. Name and Address of Current Registered Agent LANG MANAGMENT CO 21045 COMMERCIAL TRAIL BOCA RATON FL 33486 |
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| | |
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| 7. Name and Address of New Registered Agent | |
| Name | |
| Street Address (P.O. Box Number is Not Acceptable) | |
| City | Zip Code |

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

| 10. OFFICERS AND DIRECTORS | | 11. | |
|----------------------------|-----------------------|----------------|---------------------------------|
| TITLE | PD | TITLE | PD |
| NAME | LASSOFF, ALBERT | NAME | Donald Brooks |
| STREET ADDRESS | 2146 N.W. 60TH CIRCLE | STREET ADDRESS | 2155 NW 60 th Circle |
| CITY-ST-ZIP | BOCA RATON FL 33496 | CITY-ST-ZIP | Boca Raton, FL 33496 |
| TITLE | 1VPD | TITLE | VPD |
| NAME | LEONARD, KAYE | NAME | Marilyn Nachman |
| STREET ADDRESS | 2130 NW 60TH CIRCLE | STREET ADDRESS | 2112 NW 60 th Circle |
| CITY-ST-ZIP | BOCA RATON FL 33496 | CITY-ST-ZIP | Boca Raton, FL 33496 |
| TITLE | 2VPD- | TITLE | ID |
| NAME | HAAS, LEONARD | NAME | Marvin Salzenstein |
| STREET ADDRESS | 2011 NW 60TH CIRCLE | STREET ADDRESS | 2108 NW 60 th Circle |
| CITY-ST-ZIP | BOCA RATON FL 33496 | CITY-ST-ZIP | Boca Raton, FL 33496 |
| TITLE | SD | TITLE | SD |
| NAME | LEVY, JEROME | NAME | Phillip Balsam |
| STREET ADDRESS | 2134 NW 60TH CR | STREET ADDRESS | 2144 NW 60 th Circle |
| CITY-ST-ZIP | BOCA RATON FL 33496 | CITY-ST-ZIP | Boca Raton, FL 33496 |
| TITLE | ID | TITLE | D |
| NAME | GILDAR, JIM | NAME | Wileen Coyne |
| STREET ADDRESS | 2136 NW 60TH CIRCLE | STREET ADDRESS | 2151 NW 60 th Circle |
| CITY-ST-ZIP | BOCA RATON FL 33496 | CITY-ST-ZIP | Boca Raton, FL 33496 |
| TITLE | | TITLE | |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |

| |
|--|
| ORS IN 10 |
| Change <input type="checkbox"/> Addition |
| Change <input type="checkbox"/> Addition |
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Donald S Brooks* *4/8/05*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #