

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 31, 2008 8:00 am
Secretary of State

07-31-2008 90045 004 ****66.25

DOCUMENT # N28512

1. Entity Name
**FAIRWAY GOLFVIEW HOMES CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business

**151 FAIRWAY DRIVE
MIAMI SPRINGS, FL 33166**

Mailing Address

**P.O. BOX 660518
MIAMI SPRINGS, FL 33266-0518**

DO NOT WRITE IN THIS SPACE



07282008 No Chg-NP

CR2E037 (4/06)

4. FEI Number
NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**LOURDES MARIN P.A. ATTORNEY AT LAW
6600 COW PEN ROAD
SUITE 205
MIAMI LAKES, FL 33014**

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25

Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	PALENZUELA, VICTOR
STREET ADDRESS	151 FAIRWAY DR, UNIT 2314
CITY-ST-ZIP	MIAMI SPRINGS, FL 33166
TITLE	P
NAME	ANDREU, SALVADOR F
STREET ADDRESS	P.O. BOX 660518
CITY-ST-ZIP	MIAMI SPRINGS, FL 332660518
TITLE	T
NAME	ALAYA, ROSA A
STREET ADDRESS	151 FAIRWAY DRIVE, UNIT 2308
CITY-ST-ZIP	MIAMI SPRINGS, FL 33166
TITLE	S
NAME	ROSALES, ISABEL C
STREET ADDRESS	151 FAIRWAY DRIVE, UNIT 2309
CITY-ST-ZIP	MIAMI SPRINGS, FL 33166

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IN THIS SPACE**

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 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:

Rosa A. Alayo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-28-08
Date

786 873-6914
Daytime Phone #