2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 03, 2009
Secretary of State

DOCUMENT# N28512

Entity Name: FAIRWAY GOLFVIEW HOMES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

151 FAIRWAY DRIVE
MIAMI SPRINGS, FL 33166

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 660518
MIAMI SPRINGS, FL 332660518

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

LOURDES MARIN P.A. ATTORNEY AT LAW
549 MINOLA DRIVE
MIAMI SPRINGS, FL 33166 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: LOURDES C. MARIN 07/03/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: PALENZUELA, VICTOR
Address: 151 FAIRWAY DR, UNIT 2314
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: P ( ) Delete
Name: ANDREU, SALVADOR F
Address: P.O. BOX 660518
City-St-Zip: MIAMI SPRINGS, FL 332660518

Title: T ( ) Delete
Name: ALAYA, ROSA A
Address: 151 FAIRWAY DRIVE, UNIT 2308
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: S ( ) Delete
Name: ROSALES, ISABEL C
Address: 151 FAIRWAY DRIVE, UNIT 2309
City-St-Zip: MIAMI SPRINGS, FL 33166

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:

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: SALVADOR F. ANDREU P 07/03/2009
Electronic Signature of Signing Officer or Director — Date