

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90025 017 ****61.25

DOCUMENT # N28710

1. Entity Name
FAIRFAX NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business
4800 N. STATE RD. 7
105
LAUDERHILL, FL 33319 US

Mailing Address
4800 N. STATE RD. 7
105
LAUDERHILL, FL 33319 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01142008 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0072310

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GUREWITZ, MURRAY
4800 N. STATE RD. 7
105
LAUDERHILL, FL 33319

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

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 May 1, 2008**

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. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME GUREWITZ, MURRAY
STREET ADDRESS 7574 FAIRFAX DR
CITY-ST-ZIP TAMARAC, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME RANDAZZO, RANDY
STREET ADDRESS 7219 FAIRFAX DR
CITY-ST-ZIP TAMARAC, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE 2VP ☐ Delete
NAME SCHWARTZ, HERB
STREET ADDRESS 7646 FAIRFAX DR
CITY-ST-ZIP TAMARAC, FL 33321

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME REFFSIN, MURRAY
STREET ADDRESS 7242 FAIRFAX DR
CITY-ST-ZIP TAMARAC, FL 33321

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DT ☐ Delete
NAME ROSE, ALVIN
STREET ADDRESS 7342 FAIRFAX
CITY-ST-ZIP TAMARAC, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Murray Gurewitz*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MURRAY GUREWITZ

1-25-08

954-726-5871