

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 17, 2009
Secretary of State

DOCUMENT# N29047

Entity Name: FAIRWAY CLUB HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**10034 W. MCNAB
TAMARAC, FL 33321 US**New Principal Place of Business:****Current Mailing Address:**10034 W. MCNAB
TAMARAC, FL 33321 US**New Mailing Address:****FEI Number:** 65-0088653 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BROUGH, CHADROW & LEVINE PA
1900 N. COMMERCE PKWY
WESTON, FL 33326 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: LINGERFELT, JOSHUA L
Address: 3668 NW 83 LN
City-St-Zip: SUNRISE, FL 33351**Title:** VP () Delete
Name: MOSCOSO, OLGA
Address: 3608 NW 83 LN
City-St-Zip: SUNRISE, FL 33351**Title:** T () Delete
Name: GERKEN, MARLEN
Address: 3682 NW 83 LN
City-St-Zip: SUNRISE, FL 33351**Title:** S (X) Delete
Name: GILLOCK, KATHY
Address: 3696 NW 83 LN
City-St-Zip: SUNRISE, FL 33351**Title:** D (X) Delete
Name: PIXLEY, DERSEK
Address: 3674 NW 83 LN
City-St-Zip: SUNRISE, FL 33351**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VP/T (X) Change () Addition
Name: MOSCOSO, OLGA
Address: 3608 NW 83 LN
City-St-Zip: SUNRISE, FL 33351**Title:** D (X) Change () Addition
Name: PIXLEY, DEREK
Address: 3674 NW 83 LN
City-St-Zip: SUNRISE, FL 33351**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: JOSHUA LINGERFELT

P

07/17/2009

Electronic Signature of Signing Officer or Director

Date