## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N31452

FILED Apr 12, 2011 Secretary of State

Entity Name: FAIRFIELD'S BRECKENRIDGE ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O DAVENPORT PROF PROP MGMT INC. 6620 LAKE WORTH RD, STE F LAKE WORTH, FL 33467

Current Mailing Address: New Mailing Address:

C/O DAVENPORT PROF PROP MGMT INC. 6620 LAKE WORTH RD, STE F LAKE WORTH, FL 33467

FEI Number: 65-0097125 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BAKALAR & ASSOCIATES PA 150 SOUTH PINE ISLAND ROAD SUITE 540 PLANTATION, FL 33304 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: DVP

Name: ROMAN, TOM

Address: 6620 LAKE WORTH RD, STE F City-St-Zip: LAKE WORTH, FL 33467

Title:

Name: PETOSA, ANTONIO

Address: 6620 LAKE WORTH RD, STE F City-St-Zip: LAKE WORTH, FL 33467

Title: F

Name: VILLAROSE, DENNIS
Address: 6620 LAKE WORTH RD, STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: DT

Name: INDIVIGLIO, JEANETTE
Address: 6620 LAKE WORTH RD, STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: DS

Name: SEARLE, CHERYL

Address: 6620 LAKE WORTH RD, STE F City-St-Zip: LAKE WORTH, FL 33467

I hereby 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 all other like empowered.

SIGNATURE: DENNIS VILLAROSE PD 04/12/2011