

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33832

FILED
Feb 23, 2009
Secretary of State

Entity Name: FAIRWAY ONE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

RIVER HILLS COMMUNITY
VALRICO, FL 33594 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1058
RUSKIN, FL 33575 US

New Mailing Address:

FEI Number: 58-2262372

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, DEE A
409 E. COLLEGE AVE.
RUSKIN, FL 33575 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: STD () Delete
Name: HONER, THOMAS
Address: 5208 FAIRWAY ONE DRIVE
City-St-Zip: VALRICO, FL 33596

Title: STD () Delete
Name: DUTHIE, ANDREW
Address: 5142 FAIRVIEW ONE DR
City-St-Zip: VALRICO, FL 33594

Title: VP () Delete
Name: GUNN, JOHN
Address: 5127 FAIRWAY ONE DRIVE
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HONER, THOMAS
Address: 5208 FAIRWAY ONE DRIVE
City-St-Zip: VALRICO, FL 33596

Title: STD (X) Change () Addition
Name: STOGNER, SHARON
Address: 5213 FAIRVIEW ONE DR
City-St-Zip: VALRICO, FL 33594

Title: VP (X) Change () Addition
Name: CALLOWAY, JOE
Address: 5212 FAIRWAY ONE DRIVE
City-St-Zip: VALRICO, FL 33594

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: DEE ANNE KING

RA

02/23/2009

Electronic Signature of Signing Officer or Director

Date