

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38673

FILED
Jan 30, 2009
Secretary of State

Entity Name: FAIRWAY CLUB CONDOMINIUM P ASSOCIATION, INC.

Current Principal Place of Business:

G.R.S. MANAGEMENT ASSOCIATED, INC.
3900 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463

New Principal Place of Business:

4745 LUCERNE LAKES BLVD
LAKE WORTH, FL 33467 US

Current Mailing Address:

G.R.S. MANAGEMENT ASSOCIATED, INC.
3900 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 65-0273787 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SEYMOUR WINTER
4745 LUCERNE LAKES BLVD
SUITE 106
LAKE WORTH, FL 33467 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: PD () Delete
Name: WINTER, SEYMOUR,
Address: 4745 LUCERNE LAKES, BLVD., SUITE 106
City-St-Zip: LAKE WORTH, FL

Title: STD () Delete
Name: LOW, SOL,
Address: 4745 LUCERNE LAKES BLVD. #105
City-St-Zip: LAKE WORTH, FL 33467

Title: VPD () Delete
Name: FEREBEG, DUSON
Address: 4745 LUCERNE LAKES BLVD #101
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: KIRSON, ROBERT
Address: 4745 LUCERNE LAKES BLVD #108
City-St-Zip: LAKE WORTH, FL 33467 US

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: SEYMOUR WINTER

PRES

01/30/2009

Electronic Signature of Signing Officer or Director

Date