

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90031 006 ****70.00

DOCUMENT # N45100	
1. Entity Name FAIRWAY POINTE HOMEOWNER'S ASSOCIATION, INC.	

Principal Place of Business 21045 COMMERCIAL TRAIL BOCA RATON FL 33486 US	Mailing Address 21045 COMMERCIAL TRAIL BOCA RATON FL 33486 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



1st MOORE CR2E037 (10/07)

4. FEI Number 65-0327246	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILLIAM K. ISAACSON, 21045 COMMERCIAL TRL BOCA RATON FL 33486	
7. Name and Address of New Registered Agent 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 is required when reinstating)

DATE _____

FILE NOW: 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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SD SCHAEVITZ, SUSAN 2587 NW 63 ST BOCA RATON FL 33496 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	TD SCHNEIDERMAN, MILFORD 2690 NW 63RD ST BOCA RATON FL 33496 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	VD ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D BIALOW, SEENA 2540 NW 63RD STREET BOCA RATON FL 33496 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P BALTIMORE, TERRY S 2593 NW 63RD ST BOCA RATON FL 33496 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D SIEGEL, ROBERT 2534 NW 63 ST BOCA RATON FL 33496 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	TD ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:  **3-19-08**