

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

FILED
Feb 14, 2008 8:00 am
Secretary of State

02-14-2008 90021 004 ****61.25

DOCUMENT # N47524			
1. Entity Name FAIRWAY OAKS HOMEOWNERS ASSOCIATION, (1992) INC.			
Principal Place of Business 3007 FINSTERNWALD DR (2983-3001 FINSTERWALD DR.) TITUSVILLE FL 32780 US		Mailing Address 3007 FINSTERNWALD DR TITUSVILLE FL 32780 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent MARTIN, PEGGY 3007 FINSTERWALD DR TITUSVILLE FL 32780		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 required when constituting) DATE			



1st MOORE CR2E037 (10/07)

4. FEI Number **59-3046117** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

FILE NOW: FEE IS \$61.25 X
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**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD HARTIN, BARRY MR 3007 FINSTERWALD DR TITUSVILLE FL 32780 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD Martin Barry Mr. 3007 Finsterwald Dr. Titusville, Fl. 32780 ☒ Changes ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SDT MARTIN, PEGGY MRS 3007 FINSTERWALD DR TITUSVILLE FL 32780 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SDT KING, JOANNE 2999 FINSTERWALD DR. TITUSVILLE FL 32780 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	BMD BYRNE, ANDREW MR 2983 FINSTERWALD DR TITUSVILLE FL 32780 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ 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: *Leah S Martin*

2/7/08 (321)-385-9771