

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000525

**FILED**  
**Mar 22, 2010**  
**Secretary of State**

**Entity Name:** FAIRWAY ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4000 SOUTH 57TH AVE.  
STE. #101  
LAKE WORTH, FL 33463 US

**New Principal Place of Business:**

INTEGRITY PROPERTY MGT.  
5665 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33076 US

**Current Mailing Address:**

4000 SOUTH 57TH AVE.  
STE. #101  
LAKE WORTH, FL 33463 US

**New Mailing Address:**

INTEGRITY PROPERTY MGT.  
5665 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33076 US

**FEI Number:** 65-0401082

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PROPERTY MANAGEMENT RESOURCES  
4000 S 57TH AVE  
STE 101  
LAKE WORTH, FL 33463 US

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

INTEGRITY PROPERTY MGT.  
5665 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33076 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: CINDY WHITTLE

03/22/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MARTINO, PETER  
Address: 5665 CORAL RIDGE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: VPD  
Name: STIFFEL, ART  
Address: 5665 CORAL RIDGE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: TD  
Name: BRADLEY, SHERRY  
Address: 5665 CORAL RIDGE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: SD  
Name: DITMAN, LARRY  
Address: 5665 CORAL RIDGE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D  
Name: HERMAN, RAY  
Address: 5665 CORAL RIDGE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

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: PETER MARTINO

PD

03/22/2010

Electronic Signature of Signing Officer or Director

Date