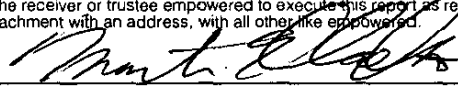


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 8:00 am
Secretary of State

01-20-2004 90077 014 ****61.25

DOCUMENT # N92000000888 1. Entity Name FAIRMONT PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business C/O GRS MANAGEMENT ASSOCIATES, INC 3900 WOODLAKE BLVD STE 201 LAKE WORTH, FL 33463 US			Mailing Address C/O GRS MANAGEMENT ASSOCIATES, INC 3900 WOODLAKE BLVD STE 201 LAKE WORTH, FL 33463 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0439975	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
HEIDLER-LADWIG, PATTI 12765 W FOREST HILL BLVD SUITE 1312 WELLINGTON, FL 33414			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2004		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	VPD	☒ Delete	TITLE	PS. ☐ Change ☒ Addition Freigenberg, David	
NAME	GRUBER, ARNOLD		NAME	10885 Fairmont Vill Dr.	
STREET ADDRESS	10813 FAIRMONT VILL DRIVE		STREET ADDRESS	LAKE WORTH, FL 33467	
CITY-ST-ZIP	LAKE WORTH, FL 33467		CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE	TD	☐ Delete	TITLE	PD. ☐ Change ☒ Addition Freedman, Barry	
NAME	LEVINE, ELAINE		NAME	10668 Fairmont Village Dr.	
STREET ADDRESS	10795 FAIRMONT VILL DRIVE		STREET ADDRESS	LAKE WORTH, FL 33467	
CITY-ST-ZIP	LAKE WORTH, FL 33467		CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE	PD	☒ Delete	TITLE	D. ☐ Change ☒ Addition Karin, William	
NAME	HABER, ERIC		NAME	10830 Fairmont Village Dr.	
STREET ADDRESS	10740 FAIRMONT VILL DRIVE		STREET ADDRESS	LAKE WORTH, FL 33467	
CITY-ST-ZIP	LAKE WORTH, FL 33467		CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE	D	☐ Delete	TITLE	PD. ☒ Change ☐ Addition Kladko, Martin	
NAME	KLADKO, MARTIN		NAME	10686 Fairmont Village Dr.	
STREET ADDRESS	10686 FAIRMONT VILL DRIVE		STREET ADDRESS	LAKE WORTH, FL 33467	
CITY-ST-ZIP	LAKE WORTH, FL 33467		CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE	D	☒ Delete	TITLE	☐ Change ☐ Addition	
NAME	GALATZ, ARTHUR		NAME		
STREET ADDRESS	1879 FAIRMONT VILLA DR.		STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH, FL 33467		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  MARTIN Kladko 1/15/04 642-8820 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					