

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003090

FILED  
Feb 23, 2010  
Secretary of State

**Entity Name:** FAIRWAYS-LAKE ESTATES COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

1750 W. BROADWAY ST.  
STE. 220  
OVIEDO, FL 32765 US

**New Principal Place of Business:**

**Current Mailing Address:**

1750 W. BROADWAY ST.  
STE. 220  
OVIEDO, FL 32765 US

**New Mailing Address:**

**FEI Number:** 59-3257555

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVIS, KEVIN  
%COMMUNITY MANAGEMENT SPECIALISTS, INC.  
1750 W. BROADWAY ST., STE 220  
OVIEDO, FL 32765 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: TD  
Name: ALEXANDER, JIM  
Address: 448 JAYBEE AVE  
City-St-Zip: DAVENPORT, FL 33897

Title: PD  
Name: BERRY, LAWRENCE  
Address: 139 CONNIE DRIVE  
City-St-Zip: DAVENPORT, FL 33897

Title: VPD  
Name: ROBERTS, RICHARD  
Address: 1011 JAYBEE AVE.  
City-St-Zip: DAVENPORT, FL 33897

Title: D  
Name: ESKIN, SHARON  
Address: 107 ELLA MAE DRIVE  
City-St-Zip: DAVENPORT, FL 33897

Title: D  
Name: GILLESPIE, SHANE  
Address: 310 ELLA MAE DIRVE  
City-St-Zip: DAVENPORT, FL 33897

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: LAWRENCE BERRY

P

02/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date