

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004564

FILED  
Apr 25, 2006  
Secretary of State

**Entity Name:** FAIRVIEW ESTATES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

5301 GREEN BRIAR DR  
LADY LAKE, FL 32159 US

**New Principal Place of Business:**

5211 GREEN BRIAR DR  
LADY LAKE, FL 32159 US

**Current Mailing Address:**

5301 GREEN BRIAR DR  
LADY LAKE, FL 32159 US

**New Mailing Address:**

5211 GREEN BRIAR DR  
LADY LAKE, FL 32159 US

**FEI Number:** 59-3406392

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

THOMAS, PETER S  
5301 GREEN BRIAR DR  
LADY LAKE, FL 32159 US

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

BAVA, JOSEPH W  
5211 GREEN BRIAR DR  
LADY LAKE, FL 32159 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: JOSEPH W. BAVA

04/25/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: THOMAS, PETER S  
Address: 5301 GREEN BRIAR DR  
City-St-Zip: LADY LAKE, FL 32159

Title: STD ( ) Delete  
Name: THOMAS, ELISABETH A  
Address: 5301 GREEN BRIAR DR  
City-St-Zip: LADY LAKE, FL 32159

Title: D ( ) Delete  
Name: KNOWLES, JOSEPH  
Address: 5409 GREEN BRIAR DR  
City-St-Zip: LADY LAKE, FL 32159

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: MELLADO, JOHN J  
Address: 5409 GREEN BRIAR DR  
City-St-Zip: LADY LAKE, FL 32159

Title: TRES (X) Change ( ) Addition  
Name: BAVA, JOSEPH W  
Address: 5211 GREEN BRIAR DR  
City-St-Zip: LADY LAKE, FL 32159

Title: SECR (X) Change ( ) Addition  
Name: BAVA, DIANE R  
Address: 5211 GREEN BRIAR DR  
City-St-Zip: LADY LAKE, FL 32159

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSEPH W. BAVA

TRES

04/25/2006

Electronic Signature of Signing Officer or Director

Date