

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000284

FILED
Jan 05, 2007
Secretary of State

Entity Name: TOWNHOMES AT FAIRVIEW ASSOCIATION, INC.

Current Principal Place of Business:

1324 SEVEN SPRINGS BLVD
#158
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

Current Mailing Address:

1324 SEVEN SPRINGS BLVD
#158
NEW PORT RICHEY, FL 34655

New Mailing Address:

FEI Number: 59-3581939 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROUCH, JOHN E
1421 LAHARA WAY
NEW PORT RICHEY, FL 34655 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: P () Delete
Name: CROUCH, JOHN
Address: 1421 LAHARA WAY
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: T (X) Delete
Name: PIGOTT, RICHARD L
Address: 9139 DEMARET COURT
City-St-Zip: TRINITY, FL 34655

Title: S () Delete
Name: PISARSKI, CHRISTINE L
Address: 1335 LAHARA WAY
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S/T (X) Change () Addition
Name: PISARSKI, CHRISTINE L
Address: 1335 LAHARA WAY
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D () Change (X) Addition
Name: BELL, DIANNE
Address: 1315 LAHARA WAY
City-St-Zip: TRINITY, FL 34655

Title: D () Change (X) Addition
Name: DUNN, TAMMY
Address: 1327 LAHARA WAY
City-St-Zip: TRINITY, FL 34655

Title: D () Change (X) Addition
Name: SYNSTAD, WAYNE
Address: 5930 SEASIDE DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

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: CHRISTINE L. PISARSKI

S/T

01/05/2007

Electronic Signature of Signing Officer or Director

_____ Date