

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03859

FILED  
Apr 04, 2011  
Secretary of State

**Entity Name:** FAIRVIEW SOUTH INC.

**Current Principal Place of Business:**

2400 SOUTH FEDERAL HIGHWAY, #230  
STUART, FL 349941558

**New Principal Place of Business:**

**Current Mailing Address:**

1729 H ST NW  
WASHINGTON, DC 20006

**New Mailing Address:**

**FEI Number:** 62-1210778

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: D  
Name: KIPLINGER, AUSTIN H  
Address: 1729 H ST NW.  
City-St-Zip: WASHINGTON, DC 20006

Title: AS  
Name: TAIT, JANELLE  
Address: 1729 H ST NW.  
City-St-Zip: WASHINGTON, DC 20006

Title: D  
Name: BONAN, MARTIN W  
Address: 2400 S FED HWY 230  
City-St-Zip: STUART, FL 34994

Title: TD  
Name: WILKES, CORBIN M.  
Address: 1729 H ST NW.  
City-St-Zip: WASHINGTON, DC 20006

Title: CH  
Name: KIPLINGER, KNIGHT A  
Address: 1729 H ST NW.  
City-St-Zip: WASHINGTON, DC 20006

Title: D  
Name: BRODERICK, STEPHEN J  
Address: 1729 H STREET NW  
City-St-Zip: WASHINGTON, DC 20006

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: W. MARTIN BONAN

DIR

04/04/2011

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

\_\_\_\_\_  
Date