

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719055

FILED  
Feb 23, 2009  
Secretary of State

Entity Name: FAIRWAYS RIVIERA ASSOCIATION, INC.

**Current Principal Place of Business:**

250 DIPLOMAT PARKWAY  
HALLANDALE, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

250 DIPLOMAT PARKWAY  
HALLANDALE, FL 33009

**New Mailing Address:**

FEI Number: 59-1288193

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BECKER & POLIAKOFF  
3111 STIRLING ROAD  
FT. LAUDERDALE, FL 33312 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: PD ( ) Delete  
Name: CONNERY, ELYSE  
Address: 200 DIPLOMAT PKWY., #826  
City-St-Zip: HALLANDALE, FL 33009

Title: SD ( ) Delete  
Name: FIELDS, YVETTE  
Address: 250 DIPLOMAT PARKWAY, #416  
City-St-Zip: HALLANDALE, FL 33009

Title: VD ( ) Delete  
Name: CUNNINGHAM, AL  
Address: 300 DIPLOMAT PKWY.  
City-St-Zip: HALLANDALE, FL 33009

Title: TD ( ) Delete  
Name: WEINERMAN, LOWELL  
Address: 200 DIPLOMAT PKWY., #631  
City-St-Zip: HALLANDALE, FL 33009

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

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

Title: D ( ) Change (X) Addition  
Name: BALLARIN, MARCO  
Address: 200 DIPLOMAT PKWY #834  
City-St-Zip: HALLANDALE, FL 33009

Title: D ( ) Change (X) Addition  
Name: FINELLO, DWAYNE  
Address: 300 DIPLOMAT PKWY #206  
City-St-Zip: HALLANDALE, FL 33009

I hereby certify that the information supplied with this filing does not qualify 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: ELYSE CONNERY

P

02/23/2009

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

\_\_\_\_\_  
Date