

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 719055

**Entity Name:** FAIRWAYS RIVIERA ASSOCIATION, INC.

**Current Principal Place of Business:**

250 DIPLOMAT PARKWAY  
HALLANDALE, FL 33009

**Current Mailing Address:**

250 DIPLOMAT PARKWAY  
HALLANDALE, FL 33009 US

**FEI Number:** 59-1288193

**Certificate of Status Desired:** No

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

AR LAW GROUP PLLC  
8785 SW 165TH AVE.  
SUITE 103  
MIAMI, FL 33193 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:** PABLO A. ARRIOLA

07/12/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            DIPASQUALE, JOSEPH  
Address        250 DIPLOMAT PARKWAY  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            BITTON, AMELIA  
Address        250 DIPLOMAT PARKWAY  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            TREASURER  
Name            CULLEN, DAVID  
Address        250 DIPLOMAT PARKWAY  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            SECRETARY  
Name            ROSEN, MARY  
Address        250 DIPLOMAT PARKWAY  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            SALINAS, KAREN C.  
Address        250 DIPLOMAT PARKWAY  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            VP  
Name            FAIN, LORA  
Address        250 DIPLOMAT PARKWAY  
City-State-Zip: HALLANDALE, FL 33009

Title            DIRECTOR  
Name            SHATKHIN, MIRA  
Address        250 DIPLOMAT PARKWAY  
City-State-Zip: HALLANDALE FL 33009

*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:** JOSEPH DIPASQUALE

PROPERTY MANAGER

07/12/2024

Electronic Signature of Signing Officer/Director Detail

Date