

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05958

Entity Name: FAIRGREEN SQUARE HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**3355 CATERINA DRIVE
NEW SMYRNA BEACH, FL 32168**Current Mailing Address:**3355 CATERINA DRIVE
NEW SMYRNA BEACH, FL 32168 US**FEI Number:** 59-2637556**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BREWER, MICHAEL L
500 CANAL STREET
NEW SMYRNA BEACH, FL 32168 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	T
Name	SPRAGUE, EARLENE J TREASURER
Address	3355 CATERINA DRIVE
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	P
Name	RICE, WILLIAM
Address	1118 FAIRVILLA DR
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	SECRETARY
Name	BELL, DONNA
Address	919 FAIRVILLA DRIVE
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	D
Name	VAN ECK, RONALD DIRECTOR
Address	1150 FAIRVILLA ..
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	DIRECTOR
Name	VANECK, RON
Address	1150 FAIRVILLA DR.
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	VP
Name	VANECK, PAT
Address	1150 FAIRVILLA DRIVE
City-State-Zip:	NEW SMYRNA BEACH FL 32168

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: EARLENE J. SPRAGUE

TREASURER

03/05/2015

Electronic Signature of Signing Officer/Director Detail_____
Date