Entity Name	: FAIRGREEN SQUARE HOMEOWNER'S AS	SOCIATION, I	NC. Secretary of State 0389287261CC
1140 FAIRVILL	A DRIVE BEACH, FL 32168		030920720100
Current Mai	ling Address:		
P.O. BOX 18 NEW SMYR	16 NA BEACH, FL 32170 US		
FEI Number	: 59-2637556		Certificate of Status Desired: No
Name and A	ddress of Current Registered Agent:		
DELOACH, JAN 418 CANAL ST NEW SMYRNA			
The above named	l entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Florida.
SIGNATURE	JAMES B. DELOACH		02/02/2021
SIGNATURE	E: JAMES B. DELOACH Electronic Signature of Registered Agent		02/02/2021 Date
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent		
	Electronic Signature of Registered Agent	Title	
Officer/Dire	Electronic Signature of Registered Agent	Title Name	Date
Officer/Dire	Electronic Signature of Registered Agent ctor Detail : DIRECTOR		Date
Officer/Dire Title Name	Electronic Signature of Registered Agent ctor Detail : DIRECTOR CROUSE, RONALD 1156 FAIRVILLA DR	Name	Date TREASURER STANTON, GLORIA 1501 UMBRELLA TREE DRIVE
Officer/Direc Title Name Address	Electronic Signature of Registered Agent ctor Detail : DIRECTOR CROUSE, RONALD 1156 FAIRVILLA DR	Name Address	Date TREASURER STANTON, GLORIA 1501 UMBRELLA TREE DRIVE
Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent ctor Detail : DIRECTOR CROUSE, RONALD 1156 FAIRVILLA DR NEW SMYRNA BEACH FL 32168	Name Address City-State-Zip:	Date TREASURER STANTON, GLORIA 1501 UMBRELLA TREE DRIVE EDGEWATER FL 32132
Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent ctor Detail : DIRECTOR CROUSE, RONALD 1156 FAIRVILLA DR NEW SMYRNA BEACH FL 32168 VP	Name Address City-State-Zip: Title	Date TREASURER STANTON, GLORIA 1501 UMBRELLA TREE DRIVE EDGEWATER FL 32132 DIRECTOR
Officer/Dire Title Name Address City-State-Zip: Title Name	Electronic Signature of Registered Agent ctor Detail : DIRECTOR CROUSE, RONALD 1156 FAIRVILLA DR NEW SMYRNA BEACH FL 32168 VP GARMERTSFELDER, STEVEN P. O. BOX 603	Name Address City-State-Zip: Title Name	Date TREASURER STANTON, GLORIA 1501 UMBRELLA TREE DRIVE EDGEWATER FL 32132 DIRECTOR KINCAID, ROGER
Officer/Dire Title Name Address City-State-Zip: Title Name Address	Electronic Signature of Registered Agent ctor Detail : DIRECTOR CROUSE, RONALD 1156 FAIRVILLA DR NEW SMYRNA BEACH FL 32168 VP GARMERTSFELDER, STEVEN P. O. BOX 603	Name Address City-State-Zip: Title Name Address	Date TREASURER STANTON, GLORIA 1501 UMBRELLA TREE DRIVE EDGEWATER FL 32132 DIRECTOR KINCAID, ROGER P.O. BOX 2011

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.

Address

SIGNATURE: ROBERT TRUGLIA

715 N. HIGHWAY 17-92

City-State-Zip: LONGWOOD FL 32750

Address

Electronic Signature of Signing Officer/Director Detail

SECRETARY

1140 FAIRVILLA DRIVE

City-State-Zip: NEW SMYRNA BEACH FL 32168

02/02/2021

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05958

FILED Feb 02, 2021