

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20457

**Entity Name:** FAIRFIELD'S BEACONWOOD ASSOCIATION, INC.

**FILED**  
**Apr 14, 2021**  
**Secretary of State**  
**0019151818CC**

**Current Principal Place of Business:**

C/O PHOENIX MANAGEMENT  
6131B LAKE WORTH ROAD  
GREENACRES, FL 33463

**Current Mailing Address:**

C/O PHOENIX MANAGEMENT  
6131B LAKE WORTH ROAD  
GREENACRES, FL 33463 US

**FEI Number: 59-2860100**

**Certificate of Status Desired: No**

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

ROSENTHAL, DAVID, C  
C/O PHOENIX MANAGEMENT INC  
6131B LAKE WORTH ROAD  
GREENACRES, FL 33463 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            PRESIDENT  
Name            MARZOUK, DAVID  
Address        6073 BEACONWOOD ROAD  
City-State-Zip: LAKE WORTH FL 33467

Title            DIRECTOR  
Name            BROWN, JIM  
Address        6209 BEACONWOOD ROAD  
City-State-Zip: LAKE WORTH FL 33467

Title            SECRETARY  
Name            SANTOSOLA, MICHAEL  
Address        6129 BEACONWOOD RD  
City-State-Zip: LAKE WORTH FL 33467

Title            TREASURER  
Name            BROWN, DEBRA  
Address        6280 BEACONWOOD RD.  
City-State-Zip: LAKE WORTH FL 33467

Title            VP  
Name            YEARY, EARL  
Address        6104 BEACONWOOD ROAD  
City-State-Zip: LAKE WORTH FL 33467

Title            DIRECTOR  
Name            OTT, PATRICK  
Address        6169 BEACONWOOD ROAD  
City-State-Zip: LAKE WORTH FL 33467

Title            DIRECTOR  
Name            CALLOWAY, GEORGE  
Address        6161 BEACONWOOD ROAD  
City-State-Zip: LAKE WORTH FL 33467

*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: DAVID MARZOUK**

**PRESIDENT**

**04/14/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date