

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31452

FILED
Apr 18, 2014
Secretary of State
CC8055978259

Entity Name: FAIRFIELD'S BRECKENRIDGE ASSOCIATION, INC.

Current Principal Place of Business:

C/O DAVENPORT PROF PROP MGMT LLC
6620 LAKE WORTH RD, STE F
LAKE WORTH, FL 33467

Current Mailing Address:

C/O DAVENPORT PROF PROP MGMT LLC
6620 LAKE WORTH RD, STE F
LAKE WORTH, FL 33467 US

FEI Number: 65-0097125

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAKALAR & ASSOCIATES PA
150 SOUTH PINE ISLAND ROAD
SUITE 540
PLANTATION, FL 33304 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 DIRECTOR
Name INDIVIGLIO, JEANETTE
Address 6620 LAKE WORTH RD, STE F
City-State-Zip: LAKE WORTH FL 33467

Title TREASURER
Name SCHUMACHER, RICH
Address 6620 LAKE WORTH RD, STE F
City-State-Zip: LAKE WORTH FL 33467

Title PRESIDENT
Name GABLER, CHAD
Address C/O DAVENPORT PROF PROP MGMT
INC.
6620 LAKE WORTH RD, STE F
City-State-Zip: LAKE WORTH FL 33467

Title VP
Name VAUGHAN, TRACY
Address C/O DAVENPORT PROF PROP MGMT
INC.
6620 LAKE WORTH RD, STE F
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY
Name JAGESSAR, RODNEY
Address C/O DAVENPORT PROF PROP MGMT
LLC
6620 LAKE WORTH RD, STE F
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: CHAD GABLER

PRESIDENT

04/18/2014

Electronic Signature of Signing Officer/Director Detail

Date