

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N34489

**Entity Name:** FAIRWAY CLUB CONDOMINIUM B ASSOCIATION, INC.

**Current Principal Place of Business:**

4725 LUCERNE LAKES BLVD  
LAKE WORTH, FL 33467

**Current Mailing Address:**

GRS MANAGEMENT ASSOCIATES, INC  
3900 WOODLAKE BLVD., STE 309  
LAKE WORTH, FL 33463 US

**FEI Number:** 65-0159210

**Certificate of Status Desired:** No

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

FW B C/O GRS MANAGEMENT ASSOC., INC  
3900 WOODLAKE BLVD.,  
309  
LAKE WORTH, 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 VPD  
Name ROSS, WILLIAM  
Address 4725 LUCERNE LAKES BLVD #409  
City-State-Zip: LAKE WORTH FL 33467

Title PD  
Name MENDELL, FREDA  
Address 4725 LUCERNE LAKES BLVD., #307  
City-State-Zip: LAKE WORTH FL 33467

Title DT  
Name DESHINCOE, MICHAEL  
Address 4725 LUCERNE LAKES BLVD  
City-State-Zip: LAKE WORTH FL 33467

Title SD  
Name SHULMAN, HAROLD  
Address 4725 LUCERNE LAKES BLVD #410  
City-State-Zip: LAKE WORTH FL 33467

Title D  
Name SURETTE, DAN  
Address 4725 LUCERNE LAKES BLVD #314  
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:** FREDA MENDELL

**PRES**

**03/05/2018**

Electronic Signature of Signing Officer/Director Detail

Date