


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2006 8:00 am
Secretary of State

03-17-2006 90138 040 ****61.25

DOCUMENT # N00000005123	
1. Entity Name FAIRWAY GREENS AT STONEYBROOK, INC.	

Principal Place of Business ADVANCE MANAGEMENT 9031 TOWN CENTER PKWY BRADENTON, FL 34202	Mailing Address ADVANCE MANAGEMENT 9031 TOWN CENTER PKWY BRADENTON, FL 34202
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc. ---	Suite, Apt. #, etc. ---
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City & State	City & State
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Zip	Country	Zip	Country
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01072006 Chg-NP CR2E037 (11/05)

4. FEI Number 65-1037590	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
ADVANCED MANAGEMENT 9031 TOWN CENTER PKWY BRADENTON, FL 34202	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees.	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIEGEL, ROBERT	NAME	
STREET ADDRESS	6624 GATEWAY AVE	STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL 34231	CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HIXSON, CHARLES	NAME	
STREET ADDRESS	371 FAIRWAY ISLES LANE	STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 34212	CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HIDALGO, LUIS	NAME	
STREET ADDRESS	261 CONGRESSIONAL LANE	STREET ADDRESS	
CITY-ST-ZIP	ROCKVILLE, MD 20852	CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILSON, DOUGLAS E	NAME	
STREET ADDRESS	9031 TOWN CENTER PKWY	STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 34202	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **3-13-06** **(941) 359-1134**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #