

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

95 MAR 23 AM 11:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N07194 (6)

1. Corporation Name
FAIRWAY ASSOCIATION, INC.

Principal Place of Business Mailing Address
5700 SADDLEBROOK WAY 5700 SADDLEBROOK WAY
WESLEY CHAPEL FL 33543-4499 WESLEY CHAPEL FL 33543-4499
US US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/21/1985 3a. Date of Last Report 01/31/1994

4. FEI Number 59-2493573 Applied For Not Applicable

5. Certificate of Status Desired \$0.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALLEN, DONALD L.
SADDLEBROOK RESORTS, INC.
5700 SADDLEBROOK WAY
WESLEY CHAPEL FL 33543

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME WALDRON, CHARLES
STREET ADDRESS 29844 BAYWOOD LANE
CITY-ST-ZIP WESLEY CHAPEL FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP 33543

TITLE D
NAME WELLS, GEOFF
STREET ADDRESS 30412 LAURELWOOD LANE
CITY-ST-ZIP WESLEY CHAPEL FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP 33543

TITLE D
NAME DEMPSEY, THOMAS L.
STREET ADDRESS 5700 SADDLEBROOK WAY
CITY-ST-ZIP WESLEY CHAPEL FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP 33543

TITLE D
NAME WARREN JONI
STREET ADDRESS 29921 BAYWOOD DRIVE
CITY-ST-ZIP WESLEY CHAPEL FL

4.1 TITLE Change Addition
4.2 NAME D OLIVITO, ANTHONY
4.3 STREET ADDRESS 5440 PINEBARK LANE
4.4 CITY-ST-ZIP WESLEY CHAPEL, FL 33543

TITLE PD
NAME GILLIS, JACK
STREET ADDRESS 5355 COBBLESTONE CT.
CITY-ST-ZIP WESLEY CHAPEL FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP 33543

TITLE ST
NAME ALLEN, DONALD L.
STREET ADDRESS 5700 SADDLEBROOK WAY
CITY-ST-ZIP WESLEY CHAPEL FL

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP 33543

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(4), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Donald L. Allen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald L. Allen

3/15/95

813-973-1111

Date

Telephone (Area #)