NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N07194 1. Corporation Name

FAIRWAY ASSOCIATION, INC.

Principal Place of Business	
4131 GUNN HIGHWAY	
TAMPA FL 33624	
us	



03-03-1999 90038 050 ****61.25

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Principal Place	of Business	Mailing Address			·		
4131 GUNN HI	GHWAY	4131 GUNN HIGHWAY			E HERMEN BEN BENER NETEN KANA MANA BUTE T	#11 B(#11 #191) #1#11 #1 9	
TAMPA FL 336	24	TAMPA FL 33624 US					
US		US			I I I I I I I I I I I I I I I I I I I		
2. Principal Pl	ace of Business	2a. Mailing Address			Date Incorporated or Qualified		
21		26			01/21/1985		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number		olied For
22		27		···	59-2493573		Applicable
City & State	9	City & State	-	·	-5. Certificate of Status Desired	\$8.75_A Fee Red	
23 Zin	Country	28			6. Election Campaign Financing	\$5.00	
Zip	25		30	,	Trust Fund Contribution	Added to	
24	9. Name and Address of Curre		, 0 ,		10. Name and Address of New Regist	ered Agent	
			81	Name			
CAIL E EL	OWERS, LCAM		82	Street	Address (P.O. Box Number is Not Acceptable)		
	RE PROPERTIES, INC.		"	0,10017	address (F. S. Box Hallbor to Not Nosophare)		
	IN HIGHWAY		83	5			1
TAMPA FL			84	City		85 Zip C	ode
				"		FL	
11. Pursuant	to the provisions of Sections 617.05	502 and 617.1508, Florida Statutes	s, the above	e-named	corporation submits this statement for the purporation's board of directors. I hereby accept the	se of changing its (registered iistered
office or n	m familiar with, and accept the oblig	pations of, Section 617.0503, Flori	da Statute	S.	Mation 6 Board of an octors. I find any according	-рр	,
SIGNATURE							
	Signature, typed or printed name of registered ag		Registered Age	int signature re	equired when reinstating) DA ADDITIONS/CHANGES TO OFFICER		RS IN 12
12.		ND DIRECTORS DELETE	1,1 TITLE		ABBITION OF THE COLUMN TO SET	☐ Change	Addition
TITLE	PD Waldron, Charles	A DECEMBER	1.2 NAME		•		
NAME STREET ADDRESS	4131 GUNN HWY			ET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33624		1.4 CITY-				
TITLE	TD	DELETE	2.1 TITLE			☐ Change	Addition
NAME	DEMPSEY, THOMAS L	- ·	2.2 NAME			•	
STREET ADDRESS	4131 GUNN HWY		2.3 STREE	T ADDRESS			,
CITY-ST-ZIP	TAMPA FL 33624		2. 4 CITY-	ST-ZIP		<u>-</u>	
TITLE	D	☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME	DEMPSEY, THOMAS L.		32 NAME	ļ			j
STREET ADDRESS	4131 GUNN HWY		3.3 STRE	T ADDRESS			
CITY-ST-ZIP	TAMPA FL 33624		3.4. CITY-			& Change	Addition
TITLE 🗸	SD	☐ DELETE	4.1 TITLE	•		Change .	L. Addition
NAME	GRIFFIN, DONALD		4, 2 NAM				
STREET ADDRESS			1	ET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33624	DELETE	4.4 CITY-	4-4		Change	Addition
TITLE	VPD	Minereie	5.1 TITLE 5.2 NAME				
NAME	GILLIS, JACK			T ADDRESS			
STREET ADDRESS	4131 GUNN HWY		5.4 CITY-				
CITY-ST-ZIP TITLE	TAMPA FL 33624	DELETE	6.1 TITLE		Curry Touce	☐ Change	Addition
NAME		•	6.2 NAME	PO	Curry Cary		••
STREET ADDRESS			•	ET ADDRESS	4/81 CUNIV HWI		[
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	Curry, Toyce 4131 GUNN HWY TAMPA, Fl. 33624		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: