

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 29, 2000 8:00 am
Secretary of State

02-29-2000 90132 046 ****61.25

DOCUMENT # N21749

1. Entity Name

FIRST FAIRWAY ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O MICHAEL L. DALE. ESQ.
 P. O. BOX 2582
 STUART FL 34995

C/O MICHAEL L. DALE. ESQ.
 P. O. BOX 2582
 STUART FL 34995-2592

00010000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DALE, MICHAEL L.
5154 S.E. FEDERAL HIGHWAY
STUART FL 33497

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME **PD**
ZOCCO, JAMES A
 STREET ADDRESS **2330 COUNTRY CLUB LANE**
 CITY-ST-ZIP **STUART FL 34996**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **TD**
SAN LORENZO, MARJORIE
 STREET ADDRESS **2270 COUNTRY CLUB LANE**
 CITY-ST-ZIP **STUART FL 34996**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **VD**
LEWANDOWSKI, JAMES
 STREET ADDRESS **2250 COUNTRY CLUB LANE**
 CITY-ST-ZIP **STUART FL 34996**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **SD**
LEWANDOWSKI, DEBRA L
 STREET ADDRESS **2250 S.E. COUNTRY CLUB LANE**
 CITY-ST-ZIP **STUART FL 34996**

TITLE Change Addition
 NAME **SD**
GARRY MEYER
 STREET ADDRESS **2210 SE COUNTRY CLUB LANE**
 CITY-ST-ZIP **STUART, FL 34996**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 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:

Signature of James A. Zocco
SIGNATURE REQUIRED

FEB. 8, 2000

561-220-1124

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)