

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 02, 2008 08:00 AM**  
**Secretary of State**



**DOCUMENT # N21749**  
 1. Entity Name  
**FIRST FAIRWAY ASSOCIATION, INC.**

Principal Place of Business  
 2210 S.E. COUNTRY CLUB LANE  
 STUART, FL 34996-5131

Mailing Address  
 2210 S.E. COUNTRY CLUB LANE  
 STUART, FL 34996-5131



03142008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>NOT APPLICABLE</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

MEYER, GARRY  
 2210 S.E. COUNTRY CLUB LANE  
 STUART, FL 34996-5131

**DO NOT WRITE IN THIS SPACE**

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: Garry Meyer, SD

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

(NOTE: Registered Agent signature required when relating)

3/14/08  
DATE

**Filing Fee Is \$61.25  
 Due by May 1, 2008**

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCLEAN, SARAH 2350 S.E. COUNTRY CLUB LANE STUART, FL 34996
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HUSNANDER, MICHELLE 2170 S.E. COUNTRY CLUB LANE STUART, FL 34996
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SIRISALEE, PREDIA 2190 S.E. COUNTRY CLUB LANE STUART, FL 34996
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MEYER, GARRY 2210 SE COUNTRY CLUB LN STUART, FL 34996
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000878029  
 04/14/08-80038-014 61.25

**DO NOT WRITE IN THIS SPACE**

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: Garry Meyer, Secy. SD  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/08  
Date

772-781-5880  
Daytime Phone #