

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 15, 2009
Secretary of State**

DOCUMENT# N21749

Entity Name: FIRST FAIRWAY ASSOCIATION, INC.

Current Principal Place of Business:

2210 S.E. COUNTRY CLUB LANE
STUART, FL 349965131

New Principal Place of Business:

Current Mailing Address:

2210 S.E. COUNTRY CLUB LANE
STUART, FL 349965131

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEYER, GARRY
2210 S.E. COUNTRY CLUB LANE
STUART, FL 349965131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCLEAN, SARAH
Address: 2350 S.E. COUNTRY CLUB LANE
City-St-Zip: STUART, FL 34996

Title: TD () Delete
Name: HUSNANDER, MICHELLE
Address: 2170 S.E. COUNTRY CLUB LANE
City-St-Zip: STUART, FL 34996

Title: VD () Delete
Name: SIRISALEE, PRED A
Address: 2190 S.E. COUNTRY CLUB LANE
City-St-Zip: STUART, FL 34996

Title: SD () Delete
Name: MEYER, GARRY
Address: 2210 SE COUNTRY CLUB LN
City-St-Zip: STUART, FL 34996

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARRY MEYER

SD

03/15/2009

Electronic Signature of Signing Officer or Director

_____ Date