FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

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

DOCUMENT # **N24987** **(2)**

1. Corporation Name

THE FAIRWAY LAKES OWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1950 BLUEWATER BLVD. NICEVILLE FL 32588-0247 US	1950 BLUEWATER BLVD. NICEVILLE FL 32588-0247 US

3. Date Incorporated or Qualified: 02/23/1988

4. FEI Number: 59-2883265 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GILBERT, CHARLES
723 PUTTER DR
NICEVILLE FL 32578

10. Name and Address of New Registered Agent

81 Name: Myers, Tom
82 Street Address (P.O. Box Number is Not Acceptable): 731 Fairway Lakes Drive
83
84 City: Niceville, FL 65 Zip Code: 32578

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: Charles Gilbert 4.20.98

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	SD	☐ Change ☒ Addition
NAME	GILBERT, CHARLES		1.2 NAME	Salsbury, Mark	
STREET ADDRESS	723 PUTTER DR		1.3 STREET ADDRESS	812 Fairway Lakes Drive	
CITY-ST-ZIP	NICEVILLE FL		1.4 CITY-ST-ZIP	Niceville, FL 32578	
TITLE	V	☒ DELETE	2.1 TITLE	TD	☐ Change ☒ Addition
NAME	BURGESS, ELLEN		2.2 NAME	Pritchard, Joyce	
STREET ADDRESS	828 FAIRWAY LAKES DR		2.3 STREET ADDRESS	717 Putter Drive	
CITY-ST-ZIP	NICEVILLE FL		2.4 CITY-ST-ZIP	Niceville, FL 32578	
TITLE	T	☐ DELETE	3.1 TITLE	PD	☒ Change ☐ Addition
NAME	MEYERS, TOM		3.2 NAME	Meyers, Tom	
STREET ADDRESS	731 PUTTER DR		3.3 STREET ADDRESS	731 Putter Drive	
CITY-ST-ZIP	NICEVILLE FL		3.4 CITY-ST-ZIP	Niceville, FL 32578	
TITLE	S	☐ DELETE	4.1 TITLE	VD	☒ Change ☐ Addition
NAME	GROSS, B.J. (MS.)		4.2 NAME	Gross, B. J. (Ms.)	
STREET ADDRESS	817 FAIRWAY LAKES		4.3 STREET ADDRESS	817 Fairway Lakes Drive	
CITY-ST-ZIP	NICEVILLE FL		4.4 CITY-ST-ZIP	Niceville, FL 32578	
TITLE	D	☒ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	SPATH, JERRY		5.2 NAME	Don Johnson	
STREET ADDRESS	818 FAIRWAY LAKES		5.3 STREET ADDRESS	823 Fairway Lakes	
CITY-ST-ZIP	NICEVILLE FL		5.4 CITY-ST-ZIP	Niceville, FL 32578	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (10/97)

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 or 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.

SIGNATURE: Charles Gilbert 4.20.98 850-897-9406