

FILE NOW: FILING FEE IS \$61.25

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Apr 26, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N24987					
1. Corporation Name THE FAIRWAY LAKES OWNERS' ASSOCIATION, INC.					
Principal Place of Business 1950 BLUEWATER BLVD. NICEVILLE FL 32588-0247 US			Mailing Address 1950 BLUEWATER BLVD. NICEVILLE FL 32588-0247 US		



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		02/23/1988	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-2883265	
24 Country		30 Country		5. Certificate of Status Desired ☐	
				\$8.75 Additional Fee Required	
				6. Election Campaign Financing ☐	
				\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MYERS, TOM 731 FAIRWAY LAKES DR NICEVILLE FL 32578				81 Name Mark Salsbury 82 Street Address (P.O. Box Number is Not Acceptable) 812 Fairway Lakes Drive 83 84 City Niceville, FL 85 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: Mark Salsbury Mark Salsbury, President DATE: 4/23/99

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD SALSBUARY, MARK ☐ DELETE	1.1 TITLE	P/D ☒ Change ☐ Addition
NAME	812 FAIRWAY LAKES DR	1.2 NAME	Mark Salsbury
STREET ADDRESS	NICEVILLE FL 32578	1.3 STREET ADDRESS	812 Fairway Lakes Drive
CITY-ST-ZIP	NICEVILLE FL 32578	1.4 CITY-ST-ZIP	Niceville, FL 32578
TITLE	TD PRITCHARD, JOYCE ☐ DELETE	2.1 TITLE	ST/D ☒ Change ☐ Addition
NAME	717 PUTTER DR	2.2 NAME	Joyce Prichard
STREET ADDRESS	NICEVILLE FL 32578	2.3 STREET ADDRESS	717 Putter Drive
CITY-ST-ZIP	NICEVILLE FL 32578	2.4 CITY-ST-ZIP	Niceville, FL 32578
TITLE	PD MEYERS, TOM ☒ DELETE	3.1 TITLE	VP/D ☐ Change ☒ Addition
NAME	731 PUTTER DR	3.2 NAME	Bill Saunders
STREET ADDRESS	NICEVILLE FL 32578	3.3 STREET ADDRESS	743 Putter Drive
CITY-ST-ZIP	NICEVILLE FL 32578	3.4 CITY-ST-ZIP	Niceville, FL 32578
TITLE	VD GROSS, B J ☒ DELETE	4.1 TITLE	D ☐ Change ☒ Addition
NAME	817 FAIRWAY LAKES DR	4.2 NAME	Randy Williams
STREET ADDRESS	NICEVILLE FL 32578	4.3 STREET ADDRESS	832 Fairway Lakes Drive
CITY-ST-ZIP	NICEVILLE FL 32578	4.4 CITY-ST-ZIP	Niceville, FL 32578
TITLE	D JOHNSON, DON ☒ DELETE	5.1 TITLE	D ☐ Change ☒ Addition
NAME	823 FAIRWAY LAKES	5.2 NAME	Cornellia Boone
STREET ADDRESS	NICEVILLE FL 32578	5.3 STREET ADDRESS	815 Fairway Lakes Drive
CITY-ST-ZIP	NICEVILLE FL 32578	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	

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, with all other like empowered.

SIGNATURE: Mark Salsbury Mark Salsbury DATE: 4/23/99 (850) 897-3614

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # X 1126

CR2E037 (11/98)