

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000017107

Entity Name: FAIRWAY CHALET, INC.

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

2331 PEMBROKE DR
CLEARWATER, FL 33764

New Principal Place of Business:

905 VIRGINIA AVE
TARPON SPRINGS, FL 34689

Current Mailing Address:

2331 PEMBROKE DR
CLEARWATER, FL 33764

New Mailing Address:

905 VIRGINIA AVE
TARPON SPRINGS, FL 34689

FEI Number: 20-2283376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTECLARO, GEORGE T
2331 PEMBROKE DR
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

LABIOS, DANILO T
905 VIRGINIA AVE
TARPON SPRINGS, FL 34689 US

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: DANILO T. LABIOS

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MONTECLARO, GEORGE T
Address: 2331 PEMBROKE DR
City-St-Zip: CLEARWATER, FL 33764

Title: VPD () Delete
Name: MONTECLARO, ESTRELLA L
Address: 2331 PEMBROKE DR
City-St-Zip: CLEARWATER, FL 33764

Title: SD (X) Delete
Name: FERRAREN, NERISA
Address: 2331 PEMBROKE DR
City-St-Zip: CLEARWATER, FL 33764

Title: TD (X) Delete
Name: LABIOS, DANILO
Address: 2331 PEMBROKE DR
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LABIOS, DANILO T
Address: 905 VIRGINIA AVE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VPD (X) Change () Addition
Name: FERAREN, MA. NERISSA M
Address: 905 VIRGINIA AVE
City-St-Zip: TARPON SPRINGS, FL 34689

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MA. NERISSA M. FERAREN

VPD

04/24/2006

Electronic Signature of Signing Officer or Director

Date