2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29047

FILED Jan 30, 2009 Secretary of State

Entity Name: FAIRWAY CLUB HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

10034 W. MCNABRY 10034 W. MCNAB

FORT LAUDERDALE, FL 33321 US TAMARAC, FL 33321 US

Current Mailing Address: New Mailing Address:

10034 W. MCNABRY 10034 W. MCNAB

FORT LAUDERDALE, FL 33321 US TAMARAC, FL 33321 US

FEI Number: 65-0088653 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ANDRES BERRIO, ESQ. FUENTIS & BERRIOM LLP

12546 WEST ATLÂNTIC BLVD CORAL SPRINGS, FL 33071 US BROUGH, CHADROW & LEVINE PA 1900 N. COMMERCE PKWY WESTON, FL 33326 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: SCOTT LEVINE 01/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P () Delete Title: P (X) Change () Addition

 Name:
 FELT, JOSHUA L
 Name:
 LINGERFELT, JOSHUA L

 Address:
 3668 NW 83 LN
 Address:
 3668 NW 83 LN

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:
 SUNRISE, FL 33351

Title: VP () Delete Title: () Change () Addition

 Name:
 MOSCOSO, OLGA
 Name:

 Address:
 3608 NW 83 LN
 Address:

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:

Title: T () Delete Title: T (X) Change () Addition

 Name:
 GERKIN, MARLENE
 Name:
 GERKEN, MARLEN

 Address:
 3682 NW 83 LN
 Address:
 3682 NW 83 LN

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:
 SUNRISE, FL 33351

Title: S () Delete Title: () Change () Addition

 Name:
 GILLOCK, KATHY
 Name:

 Address:
 3696 NW 83 LN
 Address:

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:

 Name:
 PIVLEY, DERSIR
 Name:
 PIXLEY, DERSEK

 Address:
 3674 NW 83 LN
 Address:
 3674 NW 83 LN

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:
 SUNRISE, FL 33351

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: JOSHUA LINGERFELT P 01/30/2009