

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2000 8:00 am
Secretary of State

03-17-2000 90038 002 ****61.25

DOCUMENT # 751223	
1. Entity Name FAIRWAY GARDENS, INC.	
Principal Place of Business 190 PEBBLE BCH BLVD APT 506 NAPLES FL 34113 US	Mailing Address 190 PEBBLE BEACH BLVD. APT 506 NAPLES FL 34113-6343 US
2. Principal Place of Business 190 Pebble Beach Blvd.	3. Mailing Address 190 Pebble Beach Blvd.
Suite, Apt. #, etc. #506	Suite, Apt. #, etc. #506
City & State Naples, Fl.	City & State Naples, Fl.
Zip 34113	Country USA
4. FEI Number 59-2265328	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CONLON, JOAN 190 PEBBLE BCH BLVD 504 NAPLES FL 34113		Fischer, Sr., L. A. Street Address (P.O. Box Number is Not Acceptable) 190 Pebble Beach Blvd., #401 City Naples FL Zip Code 34113	

8. 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 *L. A. Fischer, Sr.* **L. A. Fischer, Sr.** **March 15, 2000**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NUZZO, JOHN 190 PEBBLE BCH BLVD #101 NAPLES FL 34113	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lyons, David E. 190 Pebble Beach Blvd. #202 Naples, Fl., 34113	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ADAMS, CHARLES 190 PEBBLE BCH BLVD 204 NAPLES FL 34113	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S McCullough, Cheryl A. 190 Pebble Beach Blvd. #104 Naples, Fl., 34113	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SMITH, G 190 PEBBLE BCH BLVD, 304 NAPLES FL 34113	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V D Smith, G. (#304) 7649 Citrus Hill Lane Naples, Fl., 34109	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CONLON, JOAN 190 PEBBLE BEACH BLVD., # 504 NAPLES FL 34113	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAUM, ROBERT 190 PEBBLE BCH, BLVD #505 NAPLES FL 34113	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John E. Nuzzo* **John E. Nuzzo** **March 15, 2000** **(941) 775-5812**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #