

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # F01000002321

1. Entity Name  
FAIRWAY MAINTENANCE AND CLEANING, INC.



Principal Place of Business  
501 FAIRWAY DRIVE  
DEERFIELD BEACH, FL 33441

Mailing Address  
501 FAIRWAY DRIVE  
DEERFIELD BEACH, FL 33441

**FILED  
Apr 20, 2007 08:00 A  
Secretary of State**

**DO NOT WRITE IN THIS SPACE**

03142007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1106817	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.  **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PDST
NAME	KING, DON
STREET ADDRESS	501 FAIRWAY DRIVE
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
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CITY-ST-ZIP	

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IN THIS SPACE**

000000720241  
05/01/07-80096-019 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Don King*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #