2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# F93000003104

Entity Name: FAIRWAYS GOLF CORPORATION

Current Principal Place of Business:

8390 CHAMPIONS GATE BLVD
SUITE 200
CHAMPIONS GATE, FL 33896 US

New Principal Place of Business:

Current Mailing Address:

8390 CHAMPIONS GATE BLVD
SUITE 200
CHAMPIONS GATE, FL 33896 US

New Mailing Address:

FEI Number: 33-0583830 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CBD ( ) Delete
Name: ROSENSTEIN, ARNOLD
Address: 335 N.MAPLE DR.STE 366
City-St-Zip: BEVERLY HILLS, CA 90210

Title: CEOS ( ) Delete
Name: JACKSON, RON E
Address: 8390 CHAMPIONS GATE BLVD,STE 200
City-St-Zip: CHAMPION GATES, FL 33896

Title: CFO ( ) Delete
Name: SELLERS, CALVIN C III
Address: 8390 CHAMPIONS GATE BLVD
City-St-Zip: CHAMPIONS GATES, FL 33896

Title: D ( ) Delete
Name: NEIBART, LEE
Address: 60 COLUMBUS CIRCLE, 20TH FLOOR
City-St-Zip: NEW YORK, NY 10023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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: CALVIN C. SELLERS, III CFO 03/23/2009

Electronic Signature of Signing Officer or Director Date