2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J62385

Entity Name: FAIRWINDS PROPERTIES, INC.

FILED Apr 07, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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1569 S FT HARRISON AVE CLEARWATER, FL 33756 US

Current Mailing Address: New Mailing Address:

1569 S FT HARRISON AVE CLEARWATER, FL 33756 US

FEI Number: 59-2811797 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:

VELTMAN, GREG

1180 PONCE DELEON BLVD

101

CLEARWATER, FL 33756 US

EL-YOUSEF, HASSAN

1569 S FT HARRISON AVE

CLEARWATER, FL 33756 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: EL-YOUSEF, HASSAN 04/07/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS () Delete Title: DST (X) Change () Addition Name: VELTMAN, GREG, Name: EL-YOUSEF, HASSAN K

Address: 1180 PONCE DELEON BLVD, #101 Address: 1569 S FT HARRISON AVE
City-St-Zip: CLEARWATER, FL 33756 City-St-Zip: CLEARWATER, FL 33756

Title: DΡ Title: (X) Change () Addition () Delete YOUSEF, KAL EL, Name: Name: EL-YOUSEF, MOHAMMAD K 1180 PONCE DELEON BLVD #101 1569 S FT HARRISON AVE Address: Address: CLEARWATER, FL 33756 CLEARWATER, FL 33756 City-St-Zip: City-St-Zip:

Title: V () Delete Title: DV (X) Change () Addition

 Name:
 BARODY, MICHAEL,
 Name:
 AL-ABED, MAZHAR K

 Address:
 1180 PONCE DELEON BLVD #101
 Address:
 1569 S FT HARRISON AVE

 City-St-Zip:
 CLEARWATER, FL 33756
 City-St-Zip:
 CLEARWATER, FL 33756

Title: TV () Delete Title: D (X) Change () Addition

Name:BUCKLES, WILLIAM G.,Name:BUCKLES, WILLIAM G.Address:1180 PONCE DELEON BLVD #101Address:1569 S FT HARRISON AVECity-St-Zip:CLEARWATER, FL 33756City-St-Zip:CLEARWATER, FL 33756

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: EL-YOUSEF, HASSAN DST 04/07/2009