File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 APR 16 PH 1: 01 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Make Check Payable To: FLORIDA DEPARTMENT OF STATE Uppling linky or Ston Name and Mailing Address of Limited Liability Company **DOCUMENT #** L9600000532 1a. Principal Place of Business Address FAIRWAY DEVELOPERS, L.C. 2636 MELLOW LANE 2636 MELLOW LANE SEBRING FL 33870 SEBRING FL 33870 3. Date Organized or Qualified | 3a. State of 2a. Mailing Address 2. Principal Place of Business 05/07/1996 FL Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State Not Applicable 65-0665208 5. Date of Last Report 6. Certificate of Status Desired Zip Country Zip Country SB 75 Additional Fee Required X <u>03/21/1997</u> 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office HANDLEY, WILLIAM R Street Address (P.O. Box Number Is Not Acceptable) 2636 MELLOW LANE SEBRING FL 33870 500002497225-- 4 04/22/93 --01108 --010 Suite, Apt. #, etc. ****197.50 ****197.50 Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Agent Accepting Appointment) (NOT), Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM HANDLEY, WILLIAM R 2636 MELLOW LANE SEBRING FL MGRM HANDLEY, PATRICIA W 2636 MELLOW LANE SEBRING FL D WOHL, JAMES W 1800 STATE ROAD 17 SOUTH AVON PARK FL D WOHL, JERI B 1800 STATE ROAD 17 SOUTH AVON PARK FL 11. Ido 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 annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

Oaytime Phone #

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SIGNATURE: