2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M04000000076

1. Entity Name FAIRWAY-MITCHELL, LLC



Principal Place of Business

2830 CAHABA RD BIRMINGHAM, AL 35223 Mailing Address

2830 CAHABA RD BIRMINGHAM, AL 35223



06 MAY 15 AM 11:38

SECRETARY OF STATE TALLAFLASSEE, FLORIDA





04252006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 63-0882859

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filling Fee is \$50.00 Due by May 1, 2006	The above named entity submits this statement for the purpose of che the obligations of registered agent.	anging its registered office or registered agent, or both, in th	e State of Florida. I am familiar with, and accep
		(NOTE: Registered Agent signature required when reinstating)	DATE
240 2y may 1, 2000	Filing Fee is \$50.00 Due by May 1, 2006		

MANAGING MEMBERS/MANAGERS MGR TITLE THE THOMPSON DEVELOPMENT COMPANY, INC. NAME 2830 CAHABA RD STREET ADDRESS CITY-ST-ZIP BIRMINGHAM, AL 35223 TITLE NAME STREET ADDRESS CITY-ST-Z)P TITLE NAME STREET ADDRESS

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11. 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 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 ceiver or truetee empowered to the certification of the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the ceiver or truetee empowered to the certification of the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the certification of the ce

SIGNATURE:

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SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANA

MEMBER, OR AUTHORIZED REPRESENTATIVE

4-27-06

205-802-1202

Daytime Phor