

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000000458

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** FAIRWAY SAILPOINTE, LLC

**Current Principal Place of Business:**

2830 CAHABA ROAD  
BIRMINGHAM, AL 35223

**New Principal Place of Business:**

2830 CAHABA ROAD  
BIRMINGHAM, AL 35223 US

**Current Mailing Address:**

2830 CAHABA ROAD  
BIRMINGHAM, AL 35223

**New Mailing Address:**

2830 CAHABA ROAD  
BIRMINGHAM, AL 35223 US

**FEI Number:** 63-1239936

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** FAIRWAY SAILPOINTE MANAGER, LLC  
**Address:** 2830 CAHABA ROAD  
**City-St-Zip:** BIRMINGHAM, AL 35223

**Title:** MGRM  
**Name:** THOMPSON DEVELOPMENT COMPANY INC.  
**Address:** 2830 CAHABA ROAD  
**City-St-Zip:** BIRMINGHAM, AL 35223 US

**Title:** VP  
**Name:** CLIFTON, GUY S  
**Address:** 2830 CAHABA ROAD  
**City-St-Zip:** BIRMINGHAM, AL 3 US

**Title:** CFO  
**Name:** GARRISON, SIMS  
**Address:** 2830 CAHABA ROAD  
**City-St-Zip:** BIRMINGHAM, AL 35223 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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.

**SIGNATURE:** GUY S CLIFTON

VP

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date