2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009318

City-St-Zip: ORLANDO, FL 32828

FILED Jul 16, 2007 Secretary of State

Entity Nar	me: FAIRWINDS CHARITIES, INC.			
Current Principal Place of Business:		New Principal Place of Business:		
	AFAYA TR), FL 32826	135 W. CENTRAL BLVD ORLANDO, FL 32801		
Current Mailing Address:		New Mailing Address:		
	AFAYA TR D, FL 32826	135 W. CENTRAL BLVD. ORLANDO, FL 32801		
	59-3765327 FEI Number Applied For () ce with s. 607.193(2)(b), F.S., the corporation did	FEI Number Not Applicable () Certificate of Status Desired not receive the prior notice.	()	
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:		
TOBIN, LARRY F 3087 N ALAFAYA TR ORLANDO, FL 32826 US		TOBIN, LARRY F 135 W. CENTRAL BLVD. ORLANDO, FL 32801 US		
	named entity submits this statement for the e of Florida.	e purpose of changing its registered office or registered agent, o	r both,	
SIGNATURE: LARRY TOBIN		07/16/2007	07/16/2007	
	Electronic Signature of Registered A	gent Date		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete TISCHER, PHIL 3854 GATLIN WOOD DRIVE ORLANDO, FL 32812	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	D () Delete CHONODY, KATHY A 1530 MIZELL AVE WINTER PARK, FL 32789	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address:	D () Delete GOIGEL, DIANNE 2612 RAINBOW SPRINGS LN	Title: () Change () Addition Name: Address:		

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: DIANNE GOIGEL EVP 07/16/2007