

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13100

FILED
Apr 12, 2007
Secretary of State

Entity Name: FAIRWAY CHASE, INC.

Current Principal Place of Business:

4168 S. ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169 US

New Principal Place of Business:

Current Mailing Address:

4168 S. ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169 US

New Mailing Address:

FEI Number: 59-2754663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SURFCOAST REALTY INC
4168 S ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GITLEMAN, DAVID
Address: 1980 RUTGERS PLACE
City-St-Zip: DAYTONA BEACH, FL 32128

Title: VPD () Delete
Name: CAREY, PAULA
Address: 1976 RUTGERS PLACE
City-St-Zip: DAYTONA BEACH, FL 32128

Title: VPD () Delete
Name: CORDERO, LINDA
Address: 1957 RUTGERS PLACE
City-St-Zip: DAYTONA BEACH, FL 32128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GITLEMAN, DAVID
Address: 1980 RUTGERS PLACE
City-St-Zip: PORT ORANGE, FL 32128

Title: TRS (X) Change () Addition
Name: CORDERO, LINDA
Address: 1957 RUTGERS PLACE
City-St-Zip: PORT ORANGE, FL 32128

Title: SEC (X) Change () Addition
Name: LOCK, SARAH
Address: 2022 CORNELL PLACE
City-St-Zip: PORT ORANGE, FL 32128

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: ROBERT M. DEL ROSE

PD

04/12/2007

Electronic Signature of Signing Officer or Director

Date