2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2008 8:00 am Secretary of State

DOCUMENT # P94000027328 1. Enlity Name FAIRWAYS, INC.						04-28-2008 90326 050 ***150.00				
Principal Place of Business Mailing Address										
10770 COLUMBIA PIKE		10770 COLUMBIA PIKE		1			:			
SUITE 200		SUITE 200					•			
SILVER SPRING, MD 20901 US		SILVER SPRING, MD 20901		US		4 15511651 216				
2. Principal P	ace of Business - No P.O. Box #	3. Mailing Address					!O 0 10		1)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				04032008	Chg-P	CR2E034 (12/0	16)	
City & State		City & State				4. FEI Numbe 52-1873			Applied For Not Applicable	
Zip	Country	Zip	Coun				of Status Desired	\$8.75 Fee Reg	Additional	
6. Name and Address of Current Reg		gistered Agent				7. Name and	Address of New I	<u>.</u>		
V. Hallo and recticate of Current registered right				Name	7. Name and Address of New Registered Agent Name					
THE PRENTICE-HALL CORPORATION SYSTEM, INC.										
1201 HAYS ST.				Street Address (P.O. Box Number is Not Acceptable)						
SUITE 105 TALLAHASSEE, FL 32301										
TALLATIAGGEE, FL 32301										
· · · · · · · · · · · · · · · · · · ·				City	City FL Zip Code					
8. 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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE Signature, typod or printed name of registered agent and sife if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.										
10.	OFFICERS AND DIRECTORS 1					ADDITIONS/	CHANGES TO OF	FICERS AND DIRECT	ORS IN 11	
TITLE	~~~~~~		TITU					☐ Chan	ge 🔲 Addition	
NAME	MACCUTCHEON, JAMES A		NAME CTREET ADDRESS							
STREET ADDRESS CITY-ST-ZIP	10770 COLUMBIA PIKE #200 SILVER SPRING, MD 20901			et address -st-zip						
					PICI	/ -		V 0		
TITLE NAME	_ Dolote		TITLE				א או בא	Chan	ge 🔲 Addition !	
STREET ADORESS	10770 COLUMBIA PIKE #200			ET ADDRESS	1077	W(TICE) O	BIA PIKE	SUITE 200		
CITY-ST-ZIP	SILVER SPRING, MD 20901		CITY	-ST-ZIP	SIL	IER SPR	ING MB	20901		
TIRLE	VAST Delete		THTLE							
NAME	WARCZAK, CHARLES G		NAM	E	CHA	RLES &	WARCZA	K, JR, SUITE 20		
STREET ADDRESS	10770 COLUMBIA PIKE #200			ET ADDRESS	1011	10 COLUM	BIA PIKE	SUITE 20	D	
CITY-ST-ZIP	SILVER SPRING, MD 20901		CITY				NG MD			
TITLE	VPS ☐ Delate WILLIAMS, PAMELA M		TITLE			15/15		Chan	ge 🗌 Addition	
name Street address	10770 COLUMBIA PIKE #200		NAM STRE	ET ADDRESS	PAM	ELA MIV	WILLIAMS	SUITE 200	.	
CITY-ST-ZIP	SILVER SPRING, MD 20901			-ST-ZIP	501	ISE SPR	INF WP	20901	'	
TITLÉ	,	Delete	TITLE		V	<u> </u>	11461 1110	□ Chan	ge 🗶 Addition	
NAME			NAM		RAN	BALLR.	HARTIG		, ,	
STREET ADDRESS			STRE	et address	1077	O COLUN	ibia pike	5 SUITE 20	> i	
CITY-ST-ZIP			CITY				16 MB			
TITLE		☐ Delete	TITLE				_	Chan	ge 🔲 Addition	
NAME			NAM							
STREET ADDRESS CITY-ST-ZIP				et address -st-zip					Ì	
	pertify that the information supplied with	this filing dose not qualify fo	_4		ontained	Lin Chanter 110	Florida Statutas	I further certify that the	e information	

12. 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 or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

april 1, 2008 301-541-389,