2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P96000059500

1. Entity Name GARDENS ON THE FAIRWAY, INC.

FILED Mar 06, 2006 08:00 AM **Secretary of State**

Principal Place of Business

7900 GLADES RD, STE 600 BOCA RATON, FL 33434

Malling Address

7900 GLADES RD, STE 600 BOCA RATON, FL 33434



01062006

No Chg-P

CR2E034 (11/05)

4 FELNumber 65-0684425 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

TOPPEL, MICHAEL 7900 GLADES RD, STE 600 BOCA RATON, FL 33434

SIGNATURE.

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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.	

(NOTE, Registered Agent signature required when reinstating)

FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. TITLE TOPPEL, HAROLD NAME STREET ADDRESS 7900 GLADES RD STE 600 BOCA RATON, FL 33434 CITY-ST-ZIP DVP TITLE NAME TOPPEL, MICHAEL 7900 GLADES RD, STE 600 STREET ADDRESS CITY-ST-77P BOCA RATON, FL 33434 TITE TOPPEL, JONATHAN NAME STREET ADDRESS 7900 GLADES RD STE 600 CITY-ST-ZIP BOCA RATON, FL 33434 TITLE SAUER, SHERI NAME STREET ADDRESS 7900 GLADES RD, STE 600 BOCA RATON, FL 33434 CITY-ST-ZIP TITLE KASSEBAUM, KEVIN NAME STREET ADDRESS 7900 GLADES RD, STE 600 CITY-ST-ZIP BOCA RATON, FL 33434 TITLE NAME STREET ADDRESS CITY-ST-ZIP

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DATE

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12. I hereby certify that the information supplied with this filing does not quality 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 of

SIGNATURE

Michael Toppel Jordob 561-451-4696