## 2001 UNIFORM BUSINESS REPORT (UBR) Mar 26, 2001 8:00 am DOCUMENT # P97000094154 **Secretary of State** 1. Entity Name FAIRWAY PRODUCTIONS GROUP, INC. 03-26-2001 90046 036 \*\*\*150 00 Principal Place of Business Mailing Address 7108 FAIRWAY DRIVE. SUITE 100 7108 FAIRWAY DRIVE. SUITE 100 IUUVIU PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS FL 33418 2. Principal Place of Business 3. Mailing Address 9123 North Military 9123 No Military Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 805 Z08 OCity & State City & State Palus Beach Applied For 4. FEI Number 65-0792346 Beach MAIM Gardene Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired ひるひ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HAMLIN WOLSKE, JAMIE R. Street Address (P.O. Box Number is Not Acceptable) 7108 FAIRWAY DRIVE, SUITE 100 military PALM BEACH GARDENS FL 33418 8. The above pamed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 2001 March SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CEOC CR2E034 (10/00) ☐ Delete -effange ☐ Addition TITLE TITLE HAMLIN de ROY HAMLIN, ROY C JR NAME NAME Honeysuckle Dr STREET ADDRESS 170 CELESTIAL WAY -COURT \$-2 STREET ADDRESS CITY-ST-ZIP FI. 33458 CITY-ST-7IP JUNO BCH FL 33408 TITLE ☐ Delete TITLE Addition HAMLIN, R. CHARLES III NAME NAME STREET ADDRESS STREET ADDRESS 16529 85TH AVE N. CITY-ST-7IP CITY-ST-ZIP PALM BEACH FL 33418 ☐ Delete ☐ Change ☐ Addition TITLE TITLE DEMAIO, C NAME NAME STREET ADDRESS STREET ADDRESS 4102 HOLLY DR-CITY-ST-ZIP CITY-ST-ZIP PALM BCH GARDENS FL 33410 TITLE Delete TITLE ☐ Change ☐ Addition NAME CONDOR, DEE DEE NAME STREET ADDRESS STREET ADDRESS 100 CAMBRIDGE LANE CITY-ST-ZIP CITY-ST-ZIP ROYAL PALM BCH GL 33411 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the infermation supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 title receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. C. HAMILIA

SIGNATURE: