2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

May 04, 2005 8:00 am Secretary of State DOCUMENT # P97000104328 1. Entity Name 05-04-2005 90114 003 ***158.75 FAIRWAYS DEVELOPMENT OF NAPLES, INC. Principal Place of Business Mailing Address 5672 STRAND COURT 5672 STRAND COURT SUITE 1 SUITE 1 NAPLES FL 34110 NAPLES FL 34110 3. MROT ANCHOR RODE DRIVE #106 2. Principal Place of Business **801 ANCHOR RODE DRIVE #106** Suite, Apt. #, NAPLES. FL 34103 CR2E034 (10/04) Applied For City & State 4. FEI Number 59-3508165 Not Applicable Zip Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Janet **KELLY, JANET** Street Address (P.O. Box Number is Not Acceptable) 5672 STRAND CT. SUITE 1 801 ANCHOR RODE DRIVE #106 NAPLES FL 34110 NAPLES, FL 34103 City 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE PD BULE Change ☐ Detete Addition tardy, Robert S HARDY, ROBERT S NAME NAME Strand Court # 101 STREET ADDRESS 5672 STRAND COURT #1 STREET ADDRESS CITY-ST-ZIP NAPLES FL 34110 CITY-ST-ZIP VPD TITLE Delete TITLE Channe Addition rdy, Robert Paul 59 Strand Court#101 NAME HARDY, R. PAUL NAME STREET ADDRESS 5645 STRAND BLVD #3 STREET ADDRESS NAPLES FL 34110 CITY-ST-ZIP CITY-ST-7IP TITLE ST ... Delete TITLE ☐ Addition KELLY, JANET NAME STREET ADDRESS 5672 STRAND COURT, STE 1 STREET ADDRESS CITY-ST-7IP NAPLES FL 34110 CITY-ST-ZIE TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP ☐ Delete TETER Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information 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 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.

FILED