

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 02, 2011
Secretary of State

Entity Name: 7121 FAIRWAY ACQUISITION COMPANY

Current Principal Place of Business:

245 PARK AVENUE, 2ND FLOOR
ATTN: ETHEL GAVRILOVA
NEW YORK, NY 10167 US

New Principal Place of Business:

270 PARK AVENUE, 7TH FLOOR
ATTN: ETHEL GAVRILOVA
NEW YORK, NY 10017 US

Current Mailing Address:

P.O. BOX 5005
ATTN: ETHEL GAVRILOVA
NEW YORK, NY 10163 US

New Mailing Address:

FEI Number: 20-3834047 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: P
Name: GIFFORD, BENJAMIN G
Address: 270 PARK AVENUE, 7TH FLOOR
City-St-Zip: NEW YORK, NY 10017 US

Title: VP
Name: GAVRILOVA, ETHEL
Address: 270 PARK AVENUE, 7TH FLOOR
City-St-Zip: NEW YORK, NY 10017 US

Title: T
Name: DORT, ALFRED W
Address: 270 PARK AVENUE, 7TH FLOOR
City-St-Zip: NEW YORK, NY 10017 US

Title: V
Name: CARBONE, MATTHEW C
Address: 270 PARK AVENUE, 2ND FLOOR
City-St-Zip: NEW YORK, NY 10017 US

Title: D
Name: GILBERTO, S. MICHAEL W JR.
Address: 270 PARK AVENUE, 2ND FLOOR
City-St-Zip: NEW YORK, NY 10017 US

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ETHEL GAVRILOVA

VP

03/02/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date