


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005 08:00 AM
Secretary of State

DOCUMENT # M87052
 1. Entity Name
 FAIRWAY DESIGN INTERNATIONAL, INC.



Principal Place of Business _____ Mailing Address _____
 2622 W MEMORIAL 1905 S FLORIDA AVENUE
 LAKE LAND, FL 33815 US LAKE LAND, FL 33803 US

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01172005 No Chg-P CR2E034 (10/03)
 4. FEI Number 59-2934307 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 HAMIC, STEVE
 1905 S FLORIDA AVENUE
 LAKE LAND, FL 33803

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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.
 SIGNATURE _____ (NOTE Registered Agent signature required when reinstating)
 Signature, typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00
 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SMYERS, STEVEN R.
STREET ADDRESS	541 LONE PALM DRIVE
CITY-ST-ZIP	LAKELAND, FL 33815
TITLE	S
NAME	SMYERS, SHERRIN
STREET ADDRESS	541 LONE PALM DRIVE
CITY-ST-ZIP	LAKELAND, FL 33815
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Steve Smyers*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #