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FILED
Apr 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 723564 (1)
1. Corporation Name
MEADOWBROOK E.F.G.H., INC.



Principal Place of Business Mailing Address
808 NE 14TH AVE HALLANDALE FL 33008
~~C/O SUMMIT MOT
P.O. BOX 18094
PLANTATION FL 33318
FL~~

3. Date Incorporated or Qualified
05/31/1972
4. FEI Number
59-1461589
Applied For
Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country

6. Certificate of Status Desired \$8.75 Additional Fee Required
7. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

8. Name and Address of Current Registered Agent
SUMMIT PROP MOT
4480 W. SUNRISE BLVD
SUITE 6-100
PLANTATION FL 33318

10. Name and Address of New Registered Agent
81 Name
82 Street Address
83 City
84 Zip Code
LANDMARK MANAGEMENT SERVICES INC.
9000 Sheridan St. Suite #146
Pembroke Pines FL 33024-4801

11. Pursuant to the provisions of Sections 617.0602 and 617.0603, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0603, Florida Statutes.

SIGNATURE: *[Signature]* DATE: 3/11/98

13. OFFICERS AND DIRECTORS		14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD NAME WILLIAMS, DOLORES R. STREET ADDRESS 808 NE 14TH AVE, APT 700 CITY - ST - ZIP HALLANDALE FL 33008	<input type="checkbox"/> DELETE	1.1 TITLE D 1.2 NAME WILLIAMS, DOLORES R. 1.3 STREET ADDRESS 809 N.E. 14 AVE # 700 1.4 CITY - ST - ZIP HALLANDALE, FL 33009	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VD NAME MICHAELS, RENA STREET ADDRESS 808 NE 14TH AVE CITY - ST - ZIP HALLANDALE FL	<input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE TD NAME MICELLI, MIRIAM STREET ADDRESS 620 N 12TH AVE CITY - ST - ZIP HALLANDALE FL 33009	<input type="checkbox"/> DELETE	3.1 TITLE D 3.2 NAME MICELLI, MIRIAM 3.3 STREET ADDRESS 620 N.E. 12 AVE 3.4 CITY - ST - ZIP HALLANDALE, FL 33009	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE SD NAME MARCHITELLO, ELSIE STREET ADDRESS 808 NE 14TH AVE CITY - ST - ZIP HALLANDALE FL	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE D 5.2 NAME ANITA HENIGMAN 5.3 STREET ADDRESS 619 N.E. 14 AVE 5.4 CITY - ST - ZIP HALLANDALE, FL 33009	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE D 6.2 NAME FREIDA DANIELS 6.3 STREET ADDRESS 620 NE 12 AVE 6.4 CITY - ST - ZIP HALLANDALE, FL 33009	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 617.0602, Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: 3/11/98 (954) 454-4441

Phyllis Sessler of Landmark Mgmt. gave authorization by phone to add street address of registered agent 7/14/98

CREATED (10/97)