

**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**Apr 09 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 725510 (2)**  
 1. Corporation Name  
**SPRING MEADOW ASSOCIATION, INC.**

Principal Place of Business <b>1000 SPRING MEADOW DR KISSIMMEE FL 34741-3236</b>	Mailing Address <b>1000 SPRING MEADOW DR KISSIMMEE FL 34741-3236</b>
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<b>21</b> 2. Principal Place of Business Suite, Apt. #, etc.	<b>26</b> 2a. Mailing Address Suite, Apt. #, etc.
<b>22</b> City & State	<b>27</b> City & State
<b>23</b> Zip	<b>28</b> Zip
<b>24</b> Country	<b>29</b> Country

**3.** Date Incorporated or Qualified  
**02/08/1973**

**4.** FEI Number  
**59-1952153**

Applied For	Not Applicable
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**5.** Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6.** 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

**9. Name and Address of Current Registered Agent**

**SELLER, FRANCES F.  
1116 SPRING MEADOW DR.  
KISSIMMEE FL 32741**

**10. Name and Address of New Registered Agent**

<b>81</b> Name
<b>82</b> Street Address (P.O. Box Number is Not Acceptable)
<b>83</b>
<b>84</b> City
<b>85</b> Zip Code

**11.** Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD BURNWORTH, LINDA PARSLOW 1012 SPRING MEADOW DR KISSIMMEE, FL 00000	<input checked="" type="checkbox"/> DELETE	
NAME	D HAMMERL JR, LEO J 1133 SPRING MEADOW DR KISSIMMEE FL	<input type="checkbox"/> DELETE	
STREET ADDRESS	VD MIESEMER, VERONICA L 1117 SPRING MEADOW DRIVE KISSIMMEE, FL 00000	<input checked="" type="checkbox"/> DELETE	
CITY-ST-ZIP	SD MILLER, SHIRLEY 1015 SPRING MEADOW DR KISSIMMEE FL	<input type="checkbox"/> DELETE	
TITLE	TD SELLERS, FRANCES F. 1116 SPRING MEADOW DR KISSIMMEE FL	<input type="checkbox"/> DELETE	
NAME	D ROCH, MAURICE 1032 SPRING MEADOW DR KISSIMMEE FL	<input checked="" type="checkbox"/> DELETE	
STREET ADDRESS			
CITY-ST-ZIP			

1.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Costigan, Ann M.	
1.3 STREET ADDRESS	1018 Spring Meadow Dr	
1.4 CITY-ST-ZIP	Kissimmee, FL 34741	
2.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Warden, Roberta S	
3.3 STREET ADDRESS	37 Lind Ave.	
3.4 CITY-ST-ZIP	Kissimmee, FL 34744	
4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Praxinson, Tracy Webb	
6.3 STREET ADDRESS	1011 Spring Meadow Dr.	
6.4 CITY-ST-ZIP	Kissimmee, FL 34741	

**14.** 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 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:** *Frances F. Sellers* **FRANCES F. SELLERS V.P. 3-31-98 407-846-0519**

CR2E037 (10/97)

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998

DOCUMENT # 725510 (2)

Spring Meadow Association, Inc.  
1000 Spring Meadow Drive  
Kissimmee, FL 34741-3236

ADDITIONAL DIRECTORS

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7.1 TITLE	D	1_1	1x1
7.2 NAME	GEORGE H. BRAGG, Jr.	ADDITION	
7.3 ADDRESS	1035 SPRING MEADOW DR.		
7.4 CITY	KISSIMMEE	STATE	FL ZIP 34741