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Feb 25 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 728481 (3)

1. Corporation Name
THE MEADOWS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
377 SW 56TH AVENUE MARGATE FL 33068
377 SW 56TH AVENUE MARGATE FL 33068-1835

3. Date Incorporated or Qualified 12/26/1973
3a. Date of Last Report 02/01/1996

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt #, etc. 26 Suite, Apt #, etc.
22 City & State 27 City & State
23 Zip 25 Country 29 Zip 30 Country
4. FEI Number 59-1532044 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
POLIFKAFF, GARY A
EMERALD LAKE COPORATE PARK
3111 STIRLING RD
FT. LAUDERDALE FL 33312
10. Name and Address of New Registered Agent
81 Name
82 Street Address (P. O. Box Number is Not Acceptable)
83
84 City FL 85 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 Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS
TITLE PD DEASCENTIS, JOHN [X] DELETE
NAME DEASCENTIS, JOHN
STREET ADDRESS 5621 S.W. 2ND COURT 117
CITY-ST-ZIP MARGATE FL
TITLE VPD ANDUJAR, JOSE [] DELETE
NAME ANDUJAR, JOSE
STREET ADDRESS 375 SW 56TH AVE 109
CITY-ST-ZIP MARGATE FL
TITLE TD HARTMANN, RICHARD [X] DELETE
NAME HARTMANN, RICHARD
STREET ADDRESS 5641 S.W. 2ND COURT 201
CITY-ST-ZIP MARGATE FL
TITLE SD CORRENTI, CAROL [] DELETE
NAME CORRENTI, CAROL
STREET ADDRESS 5640 S.W. 3RD PLACE 201
CITY-ST-ZIP MARGATE FL
TITLE D ANDUJAR, JOSE [X] DELETE
NAME ANDUJAR, JOSE
STREET ADDRESS 5620 S.W. 3RD PLACE 106
CITY-ST-ZIP MARGATE FL
TITLE D RUBIN, CARL [X] DELETE
NAME RUBIN, CARL
STREET ADDRESS 5661 S.W. 2ND COURT 208
CITY-ST-ZIP MARGATE FL
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE PD [X] Change [] Addition
1.2 NAME RICHARD J. HARTMANN
1.3 STREET ADDRESS 5641 S.W. 2ND COURT
1.4 CITY-ST-ZIP MARGATE, FLORIDA 33068
2.1 TITLE [] Change [] Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE TD [X] Change [] Addition
3.2 NAME RAYMOND LAVOIE
3.3 STREET ADDRESS 5680 S.W. 3RD PLACE
3.4 CITY-ST-ZIP MARGATE, FLORIDA 33068
4.1 TITLE [] Change [] Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE D [X] Change [] Addition
5.2 NAME ETTORE G. MAGLIOLA
5.3 STREET ADDRESS 5681 S.W. 2ND COURT
5.4 CITY-ST-ZIP MARGATE, FLORIDA 33068
6.1 TITLE D [X] Change [] Addition
6.2 NAME ANDRE CHARETTE
6.3 STREET ADDRESS 5621 S.W. 2ND COURT
6.4 CITY-ST-ZIP MARGATE, FLORIDA 33068

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 as an attachment with an address.

SIGNATURE: Richard Hartmann RICHARD J. HARTMANN PRES 2/17/97 954920383
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone # 0025700

CR2E037 (9/96)