

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748684

FILED
Sep 07, 2005
Secretary of State

Entity Name: MEADOWBROOK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3100 NW 72ND AVENUE
SUITE #125
MIAMI, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

3100 NW 72ND AVENUE
SUITE #125
MIAMI, FL 33122 US

New Mailing Address:

FEI Number: 59-2105478 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BONAFIDE MANAGEMENT GROUP
3100 NW 72ND AVENUE #125
MIAMI, FL 331225 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: PD () Delete
Name: THOMAS, PATRICIA
Address: 14760 SW 76TH LANE
City-St-Zip: MIAMI, FL 33193

Title: D () Delete
Name: COBO, MICHAEL
Address: 7344 SW 148 CT.
City-St-Zip: MIAMI, FL 33193

Title: D () Delete
Name: ORWICK, ROBERT L
Address: 7304 SW 148 COURT
City-St-Zip: MIAMI, FL 33193

Title: TD () Delete
Name: DIAZ, YVONNE
Address: 148 26 SW 74 LANE
City-St-Zip: MIAMI, FL 33193

Title: VPD (X) Delete
Name: COHEN, JACK
Address: 7237 SW 147TH PLACE
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MAZORRA, GUSTAVO
Address: 7410 SW 148 CT
City-St-Zip: MIAMI, FL 33193

Title: SD (X) Change () Addition
Name: TRIAS, MARY LOU
Address: 14771 SW 72 TERRACE
City-St-Zip: MIAMI, FL 33193

Title: TD (X) Change () Addition
Name: RAMOS, MYRIAM L
Address: 7217 SW 147 PLACE
City-St-Zip: MIAMI, FL 33193

Title: D (X) Change () Addition
Name: PEREZ, ROGELIO
Address: 14855 SW 72 TERRACE
City-St-Zip: MIAMI, FL 33193

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GUSTAVO MAZORRA

PD

09/07/2005

Electronic Signature of Signing Officer or Director

Date