


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 26, 2007 8:00 am
Secretary of State

01-26-2007 90040 029 ****61.25

DOCUMENT # 754460
1. Entity Name
MEADOWRIDGE EAST ASSOCIATION, INC.



Principal Place of Business Mailing Address
1993 S W 15TH STREET 1993 S W 15TH STREET
DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442
US US



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E037 (10/06)

City & State City & State

4. FEI Number Applied For
59-2067014 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**FAPORTO, JOSEPH
MEADOWRIDGE EAST
1993 SW 15TH ST
DEERFIELD BEACH FL 33442**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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) _____ DATE _____
Signature, typed or printed name of registered agent and title, if applicable

**FILE NOW, FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DP <input type="checkbox"/> Delete PAPORTO, JOSEPH 1953 SW 15TH ST, #79 DEERFIELD BEACH FL 33422
TITLE NAME STREET ADDRESS CITY- ST- ZIP	T <input type="checkbox"/> Delete TOMEI, CESARE 1977 SW 15TH ST SUITE 112 DEERFIELD BEACH FL 33442
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP <input checked="" type="checkbox"/> Delete PALADINI, MARY 1913 SW 15TH ST #22 DEERFIELD BEACH FL 33442
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D <input checked="" type="checkbox"/> Delete D'AMATO, RAY 2059 SW 15TH ST # 217 DEERFIELD BEACH FL 33442
TITLE NAME STREET ADDRESS CITY- ST- ZIP	S <input checked="" type="checkbox"/> Delete WALKER, LUCILLE G 1977 S.W. 15TH ST #119 DEERFIELD BEACH FL 33442
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Stephen Skelly 1969 S. W. 15th St. #97 Deerfield Beach, FL 33442
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Michael Fernandez 1921 S. W. 15th St. #30 Deerfield Beach, FL 33442
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VICE PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition JEROME GRAFMAN 2011 S. W. 15th St. #146 Deerfield Beach, FL 33442
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition JACKIE WILLIAMS 1921 S. W. 15th St. #30 Deerfield Beach, FL 33442
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Roberto Menendez 2011 S. W. 15th St. #151 Deerfield Beach, FL 33442
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 617, 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: Joseph Paporto Date: 1/22/07 Daytime Phone #: 954-427-8933
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR