

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 766537 (5)

1. Corporation Name
THE MEADOWS SOUTH ASSOCIATION, INC.

Principal Place of Business 1325 J CHENEY HWY TITUSVILLE FL 32780	Mailing Address 1325 J CHENEY HWY TITUSVILLE FL 32780
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

**OSBORNE, LOIS
1337-D CHENEY HWY
TITUSVILLE FL 32780**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *John Megivern*
Signature, typed or printed name of registered agent and title if applicable. (Note: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS	
TITLE	P
NAME	JOHNSON, EARL
STREET ADDRESS	1321-J CHENEY HWY
CITY-ST-ZIP	TITUSVILLE FL 32780-6380
TITLE	VD
NAME	HILLA, LEO
STREET ADDRESS	1309-H CHENEY HWY
CITY-ST-ZIP	TITUSVILLE FL
TITLE	D
NAME	BARNES, LORA
STREET ADDRESS	1305-I CHENEY HWY
CITY-ST-ZIP	TITUSVILLE FL
TITLE	S
NAME	ELLIOTT, MARGARET
STREET ADDRESS	1315-D CHENEY HWY
CITY-ST-ZIP	TITUSVILLE FL 32780-6380
TITLE	D
NAME	LAUBE, MARION
STREET ADDRESS	1293 F. CHENEY HIGHWAY
CITY-ST-ZIP	TITUSVILLE, FL 00000
TITLE	T
NAME	OSBORNE, LOIS
STREET ADDRESS	1337-D CHENEY HWY
CITY-ST-ZIP	TITUSVILLE FL 32780-6380

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption under Section 1110.07, 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: *John Megivern* **John MEGIVERN** 3/1/95 (407) 264-4489

APPROVED AND FILED

95 MAR -2 PM 3:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/13/1983	3a. Date of Last Report 02/22/1994
4. FEI Number 59-2299601	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

10. Name and Address of New Registered Agent

81 Name MEGIVERN, JOHN
82 Street Address (P.O. Box Number is Not Acceptable) 1289-D CHENEY HWY
83 TITUSVILLE
84 City FL
85 Zip Code 32780

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	S ALSTON, LOUISE
4.3 STREET ADDRESS	1287-A CHENEY HWY
4.4 CITY-ST-ZIP	TITUSVILLE, FL. 32780
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	T MEGIVERN, JOHN
6.3 STREET ADDRESS	1289-D CHENEY HWY
6.4 CITY-ST-ZIP	TITUSVILLE, FL. 32780