

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 23, 2008
Secretary of State**

DOCUMENT# N05000007053

Entity Name: STERLING MEADOWS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2301 LUCIEN WAY., STE. 400
MAITLAND, FL 32751

New Principal Place of Business:

882 JACKSON AVENUE
WINTER PARK, FL 32789

Current Mailing Address:

882 JACKSON AVENUE
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 55-0914134 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALCOM, THOMAS D
882 JACKSON AVENUE
WINTER PARK, FL 32789 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: BONTRAGER, THOMAS
Address: 2301 LUCIEN WAY., STE. 400
City-St-Zip: MAITLAND, FL 32751

Title: VPD () Delete
Name: SHEELER, LAWRENCE
Address: 2301 LUCIEN WAY., STE. 400
City-St-Zip: MAITLAND, FL 32751

Title: STD () Delete
Name: CHOMA, DEBRA
Address: 2301 LUCIEN WAY., STE. 400
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: MAKRANSKY, JAMES
Address: 2301 LUCIEN WAY., STE. 400
City-St-Zip: MAITLAND, FL 32751

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: THOMAS BONTRAGER

DP

04/23/2008

Electronic Signature of Signing Officer or Director

_____ Date