

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 21, 2004
Secretary of State**

DOCUMENT# N05779

Entity Name: MAYFAIR MEADOWS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

165 WEST S. R. 434
WINTER SPRINGS, FL 32708 US

New Principal Place of Business:

225 S WESTMONTE DRIVE
SUITE 2050
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

PO BOX 915322
LONGWOOD, FL 32791

New Mailing Address:

P.O. BOX 162147
ALTAMONTE SPRINGS, FL 327162147 US

FEI Number: 59-2512931 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOMACK, ELLEN R
225 S. WESTMONTE DRIVE
SUITE 2050
ALTAMONTE SPRINGS, FL 32714 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: DV () Delete
Name: NELSON, MARCY
Address: 109 CANDLEWICK CT.
City-St-Zip: SANFORD, FL 32771

Title: DP () Delete
Name: BALDWIN, GEOFF
Address: 107 CANDLEWICK COURT
City-St-Zip: SANFORD, FL 32771

Title: SD (X) Delete
Name: BAKER, CAROL
Address: 154 MEADOW BOULEVARD
City-St-Zip: SANFORD, FL 32771

Title: DT () Delete
Name: LEWIS, CALVIN
Address: 108 CANDLEWICK COURT
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: WILLIAMSON, JOAN
Address: 130 MEADOW BOULEVARD
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: NELSON, MARCY
Address: 109 CANDLEWICK CT.
City-St-Zip: SANFORD, FL 32771

Title: DVP (X) Change () Addition
Name: BALDWIN, GEOFF
Address: 107 CANDLEWICK COURT
City-St-Zip: SANFORD, FL 32771

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

Title: D (X) Change () Addition
Name: PINTOK, JASON
Address: 139 MEADOW BLVD.
City-St-Zip: SANFORD, FL 32771

Title: DP (X) Change () Addition
Name: WILLIAMSON, JOAN
Address: 130 MEADOW BOULEVARD
City-St-Zip: SANFORD, FL 32771

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: JOAN WILLIAMSON

P

04/21/2004

Electronic Signature of Signing Officer or Director

_____ Date