

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2000 8:00 am
Secretary of State

05-30-2000 90045 018 ****61.25

DOCUMENT # N28503

1. Entity Name

THE MEADOWS EAST ASSOCIATION, INC.

Principal Place of Business

Mailing Address

847 DOW LN.
 TITUSVILLE FL 32780

847 DOW LN.
 TITUSVILLE FL 32780-6970

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2909966

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~WENDLER, CLAUS
 4708 MARENGO LA
 TITUSVILLE FL 32780~~

Name **SUTTON, MARGARET**

Street Address (P.O. Box Number is Not Acceptable)
856 Dow Ln

City **TITUSVILLE**

FL

Zip Code
32780

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.

SIGNATURE **MARGARET SUTTON**
 Signature, typed or printed name of registered agent and title if applicable.

Margaret Sutton
 (NOTE: Registered agent signature required when reinstating)

5/11/00
 DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** Delete
 NAME **WENDLER, CLAUS**
 STREET ADDRESS **4708 MARENG LANE**
 CITY-ST-ZIP **TITUSVILLE FL**

TITLE **PD** Change Addition
 NAME **SUTTON, MARGARET**
 STREET ADDRESS **856 Dow Ln**
 CITY-ST-ZIP **TITUSVILLE, FL**

TITLE **VD** Delete
 NAME **FIMLAID, AL**
 STREET ADDRESS **849 MARCELLA LN**
 CITY-ST-ZIP **TITUSVILLE FL 32780**

TITLE **VD** Change Addition
 NAME **PYNE, JIN**
 STREET ADDRESS **858 MARCELLA**
 CITY-ST-ZIP **TITUSVILLE FL**

TITLE **SD** Delete
 NAME **SUTTON, MARGARET**
 STREET ADDRESS **856 DOW LN**
 CITY-ST-ZIP **TITUSVILLE FL**

TITLE **SD** Change Addition
 NAME **BECOSH, A**
 STREET ADDRESS **845 MARCELLA**
 CITY-ST-ZIP **TITUSVILLE**

TITLE **D** Delete
 NAME **GRAMSEY**
 STREET ADDRESS **868 DOW LN**
 CITY-ST-ZIP **TITUSVILLE FL 32780**

TITLE **TD** Change Addition
 NAME **GRAMSEY, B**
 STREET ADDRESS **868 Dow Ln**
 CITY-ST-ZIP **TITUSVILLE, FL**

TITLE **D** Delete
 NAME **PATTWELL MARY**
 STREET ADDRESS **4711 MARCELLA LN**
 CITY-ST-ZIP **TITUSVILLE FL 32780**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **RENNIE, JERR**
 STREET ADDRESS **847 MARCELLA LN**
 CITY-ST-ZIP **TITUSVILLE FL 31780**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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: **MARGARET SUTTON** *Margaret Sutton* **5/11/00** **267-1342**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)