2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 30, 2004 8:00 am
Secretary of State
01-30-2004 90083 008 ****61.25

DOCUMENT # N33232

1. Entity Name

COUNTRY MEADOWS OF SARASOTA HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
POST OFFICE BOX 50183 SARASOTA FL 34232	POST OFFICE BOX 50183 SARASOTA FL 34232

MOORE CR2E037 (11/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number NO-T APPLICABLE ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SCOTT, DANIEL E. PA 2170 MAIN STREET SARASOTA FL 34237	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 N/A
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2004

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DUNAYER, CYNTHIA 1790 COUNTRY MEADOW TERRACE SARASOTA FL 34235	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DUNAYER, CYNTHIA 1790 COUNTRY MEADOWS TERRACE SARASOTA, FL. 34235 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FEASTER, KEVIN 2025 COUNTRY MEADOW PLACE SARASOTA FL 34235	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD JOHNSON, LIZ 4850 COUNTRY MEADOW PLACE SARASOTA FL 34235	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD OLSON, LAUREL 2105 COUNTRY MEADOWS PLACE SARASOTA FL 34235	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BEAHM, RON 4830 COUNTRY MEADOWS BLVD SARASOTA FL 34235	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BEAHM, RON 4830 COUNTRY MEADOWS BLVD. SARASOTA, FL 34235 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CHEAK, ANTHONY 5160 COUNTRY MEADOWS BLVD SARASOTA, FL 34235 — ☐ Change ☒ Addition

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: Laurel Olson LAUREL OLSON, TREAS. 1-25-04 (941) 371-8606
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #