2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N96000004996

FILED Aug 21, 2006 Secretary of State

Entity Name: MEADOW LANDINGS HOMEOWNERS' ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** % MORAN & ASSOCIATES, INC. 12460 S.W. 8TH STREET #202 MIAMI, FL 33184 **New Mailing Address: Current Mailing Address:** % MORAN & ASSOCIATES, INC. 12460 S.W. 8TH STREET #202 MIAMI, FL 33184 FEI Number: 65-0792828 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MORAN AND ASSOCIATES, INC. 12460 S.W. 8TH STREET #202 MIAMI, FL 33184 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition AGUILAR, MARIA LUCAS, KIM Name: Name: 13866 SW 151 AVENUE Address: 13960 SW 151 AVENUE Address: City-St-Zip: MIAMI, FL 33196 US City-St-Zip: MIAMI, FL 33196 US Title: () Delete Title: (X) Change () Addition Name: LUCAS, KIM Name: HERRERA, DIVINA Address: 13960 SW 151 AVENUE Address: 13972 SW 151 AVENUE City-St-Zip: MIAMI, FL 33196 US City-St-Zip: MIAMI, FL 33196 US Title: () Delete Title: () Change () Addition STALY, RICHARD Name: Name: 14085 SW 149 PLACE Address: Address: City-St-Zip: MIAMI, FL 33196 US City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: MENDEZ, DAVID Name: Address: 13961 SW 151 CT Address: City-St-Zip: MIAMI, FL 33196 US City-St-Zip: Title: () Delete Title: () Change () Addition PERDOMO, ANGIE Name: Name: 13959 SW 151 AVENUE Address: Address: City-St-Zip: MIAMI, FL 33196 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KIM LUCAS Ρ 08/21/2006