

2000 UNIFORM BUSINESS REPORT-(UBR)

DOCUMENT # N99000003026

1. Entity Name

MEADOWFIELD OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2955 HARTLEY ROAD
SUITE 108
JACKSONVILLE FL 32257

2955 HARTLEY ROAD
SUITE 108
JACKSONVILLE FL 32257-6284

2. Principal Place of Business
2215 EAST SR 200

3. Mailing Address
P O BOX 1987

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
YULEE FL

City & State
YULEE FL

4. FEI Number 59-3575554

Applied For
Not Applicable

Zip
32097

Country
US

Zip
32041-1987

Country
US

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

MATOVINA, GREGORY E
2955 HARTLEY ROAD
SUITE 108
JACKSONVILLE FL 32257

Name TERRELL J. POWELL

Street Address (P.O. Box Number is Not Acceptable)
2215 EAST SR 200

City YULEE

FL

Zip Code
32097

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

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

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 MATOVINA, GREGORY E
STREET ADDRESS 2955 HARTLEY ROAD, SUITE 108
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VTD ☐ Delete
NAME BORSTEIN, DONALD K
STREET ADDRESS 2955 HARTLEY ROAD, SUITE 108
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME HOWELL, WILLIAM R
STREET ADDRESS 2955 HARTLEY ROAD, SUITE 108
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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:

Gregory E. Matovina
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/00

904/225-9070

Date

Daytime Phone #

CR2E037 (9/99)