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May 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N39441 (3)

1. Corporation Name
FOREST RIDGE AT MEADOW WOODS HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business ANGELIA GORDON PROP MGMT 4030 DIJON DR ORLANDO FL 32808 US	Mailing Address ANGELIA GORDON PROP MGMT, INC. 4030 DIJON DR. ORLANDO FL 32808 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 07/26/1990
4. FEI Number 59-2754796
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

**ANGELIA GORDON
ANGELIA GORDON PROPERTY MGMT INC
4030 DIJON DRIVE
ORLANDO FL 32808**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	NAME, STREET ADDRESS, CITY-ST-ZIP
PD	MERCADO, JESSE 14912 DAY LILY CT ORLANDO FL
STD	GONZALEZ, ISMAEL 1829 WOOD VIOLET DRIVE ORLANDO FL
D	MARVA, LAURA 1825 WOOD VIOLET DRIVE ORLANDO FL
D	DUFFY, JAMES 14903 PRAIRIE ROSE CT ORLANDO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP
Director	ONORIO D'AGOSTINI 1727 WOOD VIOLET DR. ORLANDO FL 32824
Director	Tim Morris 1427 Wood Violet Dr Orlando FL 32824
Secretary	PAULINE CHOPPEN 14755 DAY LILY CT ORLANDO FL 32824
Pres	EDWIN BARBOT 14924 WILD WOOD LILY CT ORLANDO, FL 32824
Treasurer	TERRY LOCKWOOD 14721 DAY LILY CT ORLANDO FL 32824

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Edwin Barbot* 7 MAY 98 407-856-1075

CFR2037 (10/97)