2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004
Secretary of State

DOCUMENT# N94000002714

Entity Name: THE MEADOWS AT BOGGY CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

882 JACKSON AVE
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

882 JACKSON AVE
SUITE B
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 59-3274189 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JORDAN, BRETT M
882 JACKSON AVE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

VANDER VLIET, AMANDA M
882 JACKSON AVE
WINTER PARK, FL 32789 US

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: AMANDA M. VANDER VLIET 04/27/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: MCGRATH, MATT
Address: 9726 RED CLOVER AVENUE
City-St-Zip: ORLANDO, FL 32824 US

Title: P ( ) Delete
Name: NATALE, SADIE
Address: 9510 LUPINE AVE
City-St-Zip: ORLANDO, FL 32824

Title: T ( ) Delete
Name: COULSON, MICHAEL
Address: 9818 VIOLET DT
City-St-Zip: ORLANDO, FL 32824

Title: D (X) Delete
Name: HUCKE, ROGER
Address: 1962 TEABERRY DT
City-St-Zip: ORLANDO, FL 32824

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: OSBORN, STAN
Address: 9519 LUPINE AVENUE
City-St-Zip: ORLANDO, FL 32824

Title: STD (X) Change ( ) Addition
Name: NATALE, SADIE
Address: 9510 LUPINE AVE
City-St-Zip: ORLANDO, FL 32824

Title: D (X) Change ( ) Addition
Name: COULSON, MICHAEL
Address: 9818 VIOLET DT
City-St-Zip: ORLANDO, FL 32824

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SADIE NATALE STD 04/27/2004
Electronic Signature of Signing Officer or Director Date