

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000007361

**FILED**  
**Apr 20, 2004**  
**Secretary of State****Entity Name:** MEADOW CREEK AT MEADOW WOODS HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**2180 W SR 434 STE 5000  
LONGWOOD, FL 32779**New Principal Place of Business:**2180 W SR 434  
SUITE 5000  
LONGWOOD, FL 32779**Current Mailing Address:**2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044**New Mailing Address:****FEI Number:** 59-3647428      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**HART, JAMES W JR  
% SENTRY MANAGEMENT INC  
2180 W SR 434 STE 5000  
LONGWOOD, FL 327795044 US**Name and Address of New Registered Agent:**

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:****Title:** PD      ( ) Delete  
**Name:** CHASTAIN, JONNY JR  
**Address:** 2014 MEADOWS POND WAY  
**City-St-Zip:** ORLANDO, FL 32824**Title:** STD      ( ) Delete  
**Name:** ALICEA, EVELYN  
**Address:** 2039 MEADOWS POND WAY  
**City-St-Zip:** ORLANDO, FL 32824**Title:** VD      ( ) Delete  
**Name:** DALY, MAURGEN  
**Address:** 1916 MEADOW POND WAY  
**City-St-Zip:** ORLANDO, FL 32824**Title:** D      ( ) Delete  
**Name:** MONZON, JUAN C  
**Address:** 1762 MANDAVILLA DR.  
**City-St-Zip:** ORLANDO, FL 32824**Title:**      ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD      (X) Change ( ) Addition  
**Name:** OLIVERI, JEFF  
**Address:** 2026 MEADOW POND WAY  
**City-St-Zip:** ORLANDO, FL 32824**Title:** VPD      (X) Change ( ) Addition  
**Name:** ALICEA, EVELYN  
**Address:** 1741 MEADOW POND WAY  
**City-St-Zip:** ORLANDO, FL 32824**Title:** SD      (X) Change ( ) Addition  
**Name:** DALY, MAUREEN  
**Address:** 1916 MEADOW POND WAY  
**City-St-Zip:** ORLANDO, FL 32824**Title:** TD      (X) Change ( ) Addition  
**Name:** CLAVELL, EDUARDO  
**Address:** 1762 MANDAVILLA DR.  
**City-St-Zip:** ORLANDO, FL 32824**Title:** D      ( ) Change (X) Addition  
**Name:** ASENJO, PAUL  
**Address:** 2003 MEADOW POND WAY  
**City-St-Zip:** ORLANDO, FL 32824

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: JEFF OLIVERI

PD

04/20/2004

Electronic Signature of Signing Officer or Director

Date