## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000002441

FILED Jun 26, 2008 Secretary of State

Entity Name: FIELDSTONE ESTATES AT MEADOW WOODS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:** New Principal Place of Business:

8009 S. ORANGE AVE 5955 T.G. LEE BLVD

ORLANDO, FL 328096711 SUITE 300

ORLANDO, FL 32822

**Current Mailing Address:** New Mailing Address:

5955 T.G. LEE BLVD SUITE 300 8009 S. ORANGE AVE ORLANDO, FL 328096711 ORLANDO, FL 32822

FEI Number: 20-2484941 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CT CORPORATION SYSTEM LELAND MANAGEMENT 1200 S PINE ISLAND ROAD 5955 T.G. LEE BLVD SUITE 300 PLANTATION, FL 33324

ORLANDO, FL 32822 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: REBECCA FURLOW 06/26/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

STINE. KEVIN SANCHEZ, MANUEL Name: Name:

120 FAIRWAY WOODS BOULEVARD Address: 2110 WHISPERING HILLS DRIVE Address:

City-St-Zip: ORLANDO, FL 32824 City-St-Zip: CHESTER, NY 10918

Title: DV Title: (X) Change ( ) Addition ( ) Delete

BAKER, DARYL Name: NARANJO, LIZBETH Name: Address: 120 FAIRWAY WOODS BOULEVARD Address: 2137 MEADOW VISTA COURT

City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32824

Title: DST (X) Delete Title: () Change () Addition

ALFANDRE, STEPHEN Name: Name: 120 FAIRWAY WOODS BOULEVARD Address: Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MANUEL SANCHEZ DP 06/26/2008