

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED 02-17-2003 90180 024 *****61.25
N00000001386

DOCUMENT # N00000001386

1. Entity Name

MEADOW OAKS HOMEOWNER'S ASSOCIATION, INC.



03 FEB 19 PM 2:12

CLERK OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
5300 SOUTH ORANGE AVENUE
ORLANDO, FL 32809

Mailing Address
5300 SOUTH ORANGE AVENUE
ORLANDO, FL 32809



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
1392 WOODWIND DR

3. Mailing Address
1392 WOODWIND DR

Suite, Apt. #, etc.
APOPKA FL

Suite, Apt. #, etc.
APOPKA FL

City & State
32703

City & State

4. FEI Number 59-3639496

Applied For
Not Applicable

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

Name Steven Hutchinson
Street Address (P.O. Box Number is Not Acceptable)
1392 Woodwind Drive
Apopka
City FL Zip Code 32703

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [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
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	ALEXANDER, MICHAEL J	☐ Delete
NAME	1593 WOODWIND DR	
STREET ADDRESS	APOPKA FL 32703	
CITY-ST-ZIP		
TITLE	VP	☒ Delete
NAME	BEAULAC, WAYNE	
STREET ADDRESS	1543 PALMSTONE DR	
CITY-ST-ZIP	APOPKA FL 32703	
TITLE	S	☐ Delete
NAME	ADAMS, PATRICIA	
STREET ADDRESS	1602 WOODSTONE DR	
CITY-ST-ZIP	APOPKA FL 32703	
TITLE	D	☒ Delete
NAME	JESSEE, JACQUELINE B	
STREET ADDRESS	1540 PALMSTONE DR	
CITY-ST-ZIP	APOPKA FL 32703	
TITLE	D	☒ Delete
NAME	LEONARD, RICKY	
STREET ADDRESS	1584 PALMSTONE DR	
CITY-ST-ZIP	APOPKA FL 32703	
TITLE	D	☒ Delete
NAME	DUNCAN, KENNETH N	
STREET ADDRESS	1632 WOODSTONE DR	
CITY-ST-ZIP	APOPKA FL 32703	

TITLE	Director	☒ Change ☐ Addition
NAME	Alexander, Michael J	
STREET ADDRESS	1593 Woodwind Drive	
CITY-ST-ZIP	Apopka, FL 32703	
TITLE	Director	☐ Change ☒ Addition
NAME	Barnes, Timothy	
STREET ADDRESS	1375 Woodwind Ave	
CITY-ST-ZIP	Apopka, FL 32703	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director	☐ Change ☒ Addition
NAME	Delgado, Luis	
STREET ADDRESS	1585 Woodwind Ave	
CITY-ST-ZIP	Apopka, FL 32703	
TITLE	Director	☐ Change ☒ Addition
NAME	Carter, Fred	
STREET ADDRESS	1526 Woodwind Dr	
CITY-ST-ZIP	Apopka, FL 32703	
TITLE	President	☐ Change ☒ Addition
NAME	Hutchinson, Steve	
STREET ADDRESS	1392 Woodwind Ave	
CITY-ST-ZIP	Apopka, FL 32703	

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: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)