

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754460

Entity Name: MEADOWRIDGE EAST ASSOCIATION, INC.

Current Principal Place of Business:

1993 SW 15TH STREET
DEERFIELD BEACH, FL 33442

Current Mailing Address:

1993 SW 15TH STREET
DEERFIELD BEACH, FL 33442 US

FEI Number: 59-2067014

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAMPBELL PROPERTY MANAGEMENT
1993 SW 15TH STREET
DEERFIELD BEACH, FL 33066 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: LAURA DOXEY

04/21/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ROSARIO, ADALI
Address 1993 SW 15TH STREET
City-State-Zip: DEERFIELD BEACH FL 33442

Title VP
Name CLEM, JUDITH
Address 1993 SW 15TH ST
City-State-Zip: DEERFIELD BEACH FL 33442

Title TREASURER
Name TREROTOLA, GUY
Address 1993 SW 15 ST
City-State-Zip: DEERFIELD BEACH FL 33442

Title SECRETARY
Name MODUGNO, ELIZABETH
Address 1993 SW 15 ST
City-State-Zip: DEERFIELD BEACH FL 33442

Title DIRECTOR
Name PYRPIRIS, GEORGE
Address 1993 SW 15 ST
City-State-Zip: DEERFIELD BEACH FL 33442

Title DIRECTOR
Name VOLLONO, JANE
Address 1993 SW 15 ST
City-State-Zip: DEERFIELD BEACH FL 33442

Title DIRECTOR
Name REARDON, WILLIAM
Address 1993 SW 15TH ST
City-State-Zip: DEERFIELD BEACH FL 33442

Title PROPERTY MANAGER
Name DOXEY, LAURA
Address 1993 SW 15TH STREET
City-State-Zip: DEERFIELD BEACH FL 33442

I hereby 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 all other like empowered.

SIGNATURE: LAURA DOXEY

PROPERTY MANAGER

04/21/2021

Electronic Signature of Signing Officer/Director Detail

Date