

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 755198

**Entity Name:** THE MEADOWS ASSOCIATION, INC.

**Current Principal Place of Business:**

1250 CHENEY HIGHWAY  
# H  
TITUSVILLE, FL 32780-6355

**Current Mailing Address:**

1250 CHENEY HIGHWAY  
# H  
TITUSVILLE, FL 32780-6355

**FEI Number:** 59-2099212

**Certificate of Status Desired:** Yes

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

ROBERTS, BRENDA C  
1250 CHENEY HWY  
# H  
TITUSVILLE, FL 32780-6355 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:** BRENDA C ROBERTS

05/27/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           HOLMES, CATHERINE  
Address        1250 CHENEY HIGHWAY  
                  # H  
City-State-Zip: TITUSVILLE FL 32780-6355

Title           T  
Name           ROBERTS, BRENDA  
Address        1250 CHENEY HWY #H  
City-State-Zip: TITUSVILLE FL 32780

Title           SECRETARY  
Name           BOONE, CAROLYN  
Address        1250 CHENEY HIGHWAY  
                  # H  
City-State-Zip: TITUSVILLE FL 32780-6355

Title           DIRECTOR  
Name           VOGEL, WILLIAM  
Address        1250 CHENEY HIGHWAY  
                  # H  
City-State-Zip: TITUSVILLE FL 32780-6355

Title           DIRECTOR  
Name           PADULA, KAE  
Address        1250 CHENEY HIGHWAY  
                  # H  
City-State-Zip: TITUSVILLE FL 32780-6355

Title           DIRECTOR  
Name           HOGUE, LYNN  
Address        1250 CHENEY HIGHWAY  
                  # H  
City-State-Zip: TITUSVILLE FL 32780-6355

Title           VP  
Name           JONES, DIANE  
Address        1250 H CHENEY HWY  
City-State-Zip: TITUSVILLE FL

*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:** BRENDA C ROBERTS

**TREASURER**

05/27/2024

Electronic Signature of Signing Officer/Director Detail

Date