## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 755426** 

Entity Name: MEADOWLARK COVE HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 20, 2018
Secretary of State
CC6396787066

## **Current Principal Place of Business:**

C/O SWFL CAM SERVICES, LLC 10231 METRO PARKWAY,#204 FORT MYERS, FL 33966

## **Current Mailing Address:**

C/O SWFL CAM SERVICES, LLC 10231 METRO PARKWAY,#204 FORT MYERS, FL 33966 US

FEI Number: 59-2121703 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SWFL CAM SERVICES, LLC 10231 METRO PARKWAY,#204 FORT MYERS, FL 33966 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:

Officer/Director Detail:

Title DV Title DT

Electronic Signature of Registered Agent

Name BOOCK, GEORGE Name BOOCK, ELIZABETH

Address C/O SWFL CAM SERVICES, LLC Address C/O SWFL CAM SERVICES, LLC

10231 METRO PARKWAY,#204 10231 METRO PARKWAY,#204

City-State-Zip: FORT MYERS FL 33966 City-State-Zip: FORT MYERS FL 33966

Title DP Title DS

Name TREALOUT, PENNY Name BARKER, SUZANNE

Address C/O SWFL CAM SERVICES, LLC Address C/O SWFL CAM SERVICES, LLC

10231 METRO PARKWAY,#204 10231 METRO PARKWAY,#204

City-State-Zip: FORT MYERS FL 33966 City-State-Zip: FORT MYERS FL 33966

Title D

Name COUSELO, EUNICE

Address C/O SWFL CAM SERVICES, LLC

10231 METRO PARKWAY,#204

City-State-Zip: FORT MYERS FL 33966

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: GEORGE BOOCK

DIRECTOR/VICE-PRESIDENT

03/20/2018

Date