

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766537

Entity Name: THE MEADOWS SOUTH ASSOCIATION, INC.**Current Principal Place of Business:**1321 CHENEY HWY
UNIT D
TITUSVILLE, FL 32780**Current Mailing Address:**PO BOX 5635
TITUSVILLE, FL 32783-5635**FEI Number:** 59-2299601**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CLAYTON 7 MCCULLOH
ATTN: RUSSELL KREMM, ESQ
1065 MAITLAND CENTER COMMONS BLVD
MAITLAND, FL 32751 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	CALL, KATHERINE
Address	1321D CHENEY HWY.
City-State-Zip:	TITUSVILLE FL 32780

Title	VD
Name	THOMAS, JODI
Address	1283C CHENEY HWY.
City-State-Zip:	TITUSVILLE FL 32780

Title	SD
Name	HIGGINS, JACQUELINE
Address	1305B CHENEY HWY
City-State-Zip:	TITUSVILLE FL 32780

Title	DIRECTOR
Name	CAHOON, JOANN
Address	1333B CHENEY HWY.
City-State-Zip:	TITUSVILLE FL 32780

Title	DIRECTOR
Name	HEPPLER, LINDA
Address	1283G CHENEY HWY
City-State-Zip:	TITUSVILLE FL 32780

Title	DIRECTOR
Name	KENNEDY, KATHRYN
Address	1305F CHENEY HWY
City-State-Zip:	TITUSVILLE FL 32780

Title	DIRECTOR
Name	BRAGUE, LISA
Address	1281A CHENEY HWY
City-State-Zip:	TITUSVILLE FL 32780

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: KATHERINE CALL

PRESIDENT

02/22/2021

Electronic Signature of Signing Officer/Director Detail_____
Date