

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

DOCUMENT# N03000003925

**Entity Name:** MEADOWS OF ASTATULA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

25115 ALAMANDA DRIVE  
ASTATULA, FL 34705

**Current Mailing Address:**

MEADOWS OF ASTATULA HOA C/O PARENT MANAGEMENT CO., INC.  
P. O. BOX 492228  
LEESBURG, FL 34749 US

**FEI Number:** 27-0057103

**Certificate of Status Desired:** No

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

HOMICH, JAMES L ESQ.  
621 E. FIFTH AVENUE  
MOUNT DORA, FL 32757 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            PRESIDENT  
Name            MCFERRIN, KENNETH  
Address        25115 ALAMANDA DRIVE  
City-State-Zip: ASTATULA FL 34705

Title            VP  
Name            NECCO, JESSICA  
Address        25115 ALAMANDA DRIVE  
City-State-Zip: ASTATULA FL 34705

Title            TREASURER, SECRETARY  
Name            MAYER, SALLY ANN  
Address        25115 ALAMANDA DRIVE  
City-State-Zip: ASTATULA FL 34705

Title            DIRECTOR  
Name            KASH, CAYCE  
Address        25115 ALAMANDA DRIVE  
City-State-Zip: ASTATULA FL 34705

Title            DIRECTOR  
Name            TAYLOR, JUDY  
Address        25115 ALAMANDA DRIVE  
City-State-Zip: ASTATULA FL 34705

*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:** KENNETH MCFERRIN

**PRESIDENT**

**03/22/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date