## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36755

Entity Name: THE MEADOWS OF SUGAR MILL, INC.

FILED Feb 01, 2017 Secretary of State CC2979916911

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

RED MAPLE WAY, LOCH LINNHE LOCH LAGGAN, LOCH LOMOND NEW SMYRNA BEACH, FL 32168

## **Current Mailing Address:**

C/O ATLANTIC COMM ASSOC MGMT & ACCT INC. 507 HERBERT ST., STE. C PORT ORANGE, FL 32129 US

FEI Number: 59-3028649 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

YACEK, RENNY M %ATLANTIC COMM ASSOC MGMT & ACC INC 507 HERBERT ST., STE. C PORT ORANGE, FL 32129 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

Officer/Director Detail:

Title VP Title PRESIDENT

Name CHAVERS, JOHN Name SCHMIDT, MICHAEL

Address 1108 LOCH LAGGAN CT Address 1067 RED MAPLE WAY

City-State-Zip: NEW SMYRNA BEACH FL 32168 City-State-Zip: NEW SMYRNA BEACH FL 32168

Title TREASURER, DIRECTOR Title SECRETARY, DIRECTOR

Name PURDY, TOM Name BRYS, BETTY

Address 1087 RED MAPLE WAY Address 1107 LOCH LAGGAN CT

City-State-Zip: NEW SMYRNA BEACH FL 32168 City-State-Zip: NEW SMYRNA BEACH FL 32168

Title DIRECTOR
Name LUDKA, TOM

Address 1106 LOCH LAGGAN

City-State-Zip: NEW SMYRNA BEACH FL 32168

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: MICHAEL SCHMIDT

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

02/01/2017

Date