## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002714

**Entity Name: THE MEADOWS AT BOGGY CREEK HOMEOWNERS** 

ASSOCIATION, INC.

**Current Principal Place of Business:** 

882 JACKSON AVE WINTER PARK, FL 32789

**Current Mailing Address:** 

882 JACKSON AVE

WINTER PARK, FL 32789 US

FEI Number: 59-3274189 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JORDAN, BRETT M 882 JACKSON AVE WINTER PARK, FL 32789 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

**FILED** Apr 27, 2015

**Secretary of State** 

CC5288084246

Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY** Name BELLO, CHERYL Name PORTO, NORMA

Address 882 JACKSON AVE. Address 882 JACKSON AVENUE City-State-Zip: WINTER PARK FL 32789 City-State-Zip: WINTER PARK FL 32789

VΡ Title **DIRECTOR** Title

Name COULSON, MICHAEL Name CHANDLER, MICHAEL Address 882 JACKSON AVENUE Address 882 JACKSON AVE City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR Name JACKSON, LORI 882 JACKSON AVE Address

WINTER PARK FL 32789 City-State-Zip:

WINTER PARK FL 32789

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: CHERYL BELLO

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

04/27/2015