

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 464306

FILED
Feb 23, 2009
Secretary of State

Entity Name: MEADOWBROOK LAKES SECTION "A" RECREATION CENTER, INC.

Current Principal Place of Business:

202 SE 10TH ST
#407
DANIA, FL 33004 US

New Principal Place of Business:

Current Mailing Address:

202 SE 10TH ST
#407
DANIA, FL 33004 US

New Mailing Address:

FEI Number: 59-1613536 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HEYEN, TOM D
202 SE 10TH ST
#407
DANIA, FL 33004 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: HEYEN, TOM D
Address: 202 SE 10TH #407
City-St-Zip: DANIA, FL 33004 US

Title: VP () Delete
Name: THOMAS, JACK
Address: 206 SE 10ST
City-St-Zip: DANIA, FL 33004

Title: SEC () Delete
Name: PELLATARI, WINN
Address: 1024 SE 3RD AVE #201
City-St-Zip: DANIA, FL 33004

Title: DV () Delete
Name: GRONDINES, BERNARD
Address: 205 SE 11TH TER #102
City-St-Zip: DANIA, FL 33004

Title: V () Delete
Name: DEJORDINS, GUY
Address: 306 SE 10RD SY
City-St-Zip: DANIA, FL 33004

Title: D () Delete
Name: MARIE, ANNE
Address: 1024 SE 3RD AVE
City-St-Zip: DANIA, FL 33004

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOM HEYEN

PT

02/23/2009

Electronic Signature of Signing Officer or Director

_____ Date