

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 22, 2007 8:00 am**  
**Secretary of State**

05-22-2007 90017 029 \*\*\*150.00

**DOCUMENT # 571711**

1. Entity Name

MEADOWBROOK LAKES SECTION "C" RECREATION  
CENTER, INC.



Principal Place of Business

414 SOUTHEAST 10TH STREET  
APT 203  
DANIA BEACH FL 33004  
US

Mailing Address

414 SOUTHEAST 10TH STREET  
APT 203  
DANIA BEACH FL 33004  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

P.O. Box 92

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Dania Bch FL

4. FEI Number

59-1872779

Applied For

Not Applicable

Zip

Country

Zip

Country

33004

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RAPID TAX  
C/O ROBERT YOUNG  
124 S FEDERAL HIGHWAY  
DANIA FL 33004

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P  
NAME AVILES, PETER ☒ Delete  
STREET ADDRESS 414 SE 10TH ST APT 203  
CITY-STATE-ZIP DANIA BEACH FL 33004

TITLE V  
NAME BUSKE, SALLY ☐ Delete  
STREET ADDRESS 425 SE 11TH TERR APT 202  
CITY-STATE-ZIP DANIA BEACH FL 33004

TITLE T  
NAME BELLO, RUTH ☐ Delete  
STREET ADDRESS 1024 SE 4TH AVE APT 105  
CITY-STATE-ZIP DANIA BEACH FL 33004

TITLE S  
NAME PARTRIDGE, DENNIS ☐ Delete  
STREET ADDRESS 414 SE 10TH ST APT 104  
CITY-STATE-ZIP DANIA BEACH FL 33004

TITLE BM  
NAME DEMYON, JENNIE ☐ Delete  
STREET ADDRESS 415 SE 11TH TERRACE APT 105  
CITY-STATE-ZIP DANIA BEACH FL 33004

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

11.

TITLE  
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CITY-STATE-ZIP

New Received  
this notice until  
5/7/07. Due to old  
address of prior  
officer.

President

CTORS IN 11

Change ☐ Addition

Change ☐ Addition

Change ☐ Addition

Change ☐ Addition

Change ☒ Addition

Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/9/07  
Date

754-220-1040  
Daytime Phone #