

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 571711

FILED  
Jan 06, 2009  
Secretary of State

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

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 92  
DANIA BEACH, FL 33004 US

**New Mailing Address:**

**FEI Number:** 59-1872779

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAPID TAX  
C/O ROBERT YOUNG  
124 S FEDERAL HIGHWAY  
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: V ( ) Delete  
Name: BUSKE, SALLY  
Address: 425 SE 11TH TERR APT 202  
City-St-Zip: DANIA BEACH, FL 33004

Title: T ( ) Delete  
Name: BELLO, RUTH  
Address: 1024 SE 4TH AVE APT 105  
City-St-Zip: DANIA BEACH, FL 33004

Title: S ( ) Delete  
Name: PARTRIDGE, DENNIS  
Address: 414 SE 10TH ST APT 104  
City-St-Zip: DANIA BEACH, FL 33004

Title: BM ( ) Delete  
Name: DEMYON, JENNIE  
Address: 415 SE 11TH TERRACE APT 105  
City-St-Zip: DANIA BEACH, 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  
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:** RUTH BELLO

T

01/06/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date