

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717204

FILED
Jan 20, 2009
Secretary of State

Entity Name: MEADOWBROOK TOWERS CONDOMINIUM "E", INC.

Current Principal Place of Business:

619 NORTHEAST 14TH AVENUE
HALLANDALE FLA, 33009

New Principal Place of Business:

619 NORTHEAST 14TH AVENUE
APT. 205
HALLANDALE BEACH, FL 33009

Current Mailing Address:

619 N.E. 14TH AVE #205
HALLANDALE, FL 33009 US

New Mailing Address:

619 NORTHEAST 14TH AVENUE
APT. 205
HALLANDALE BEACH, FL 33009

FEI Number: 59-1286898

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRINCE, STEVEN
619 NE 14TH AVE.
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

PRINCE, STEVEN
619 NE 14TH AVE.
APT. 205
HALLANDALE BEACH, FL 33009 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: STEVEN PRINCE

01/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AZARNIA, SIMON
Address: 619 NE 14TH AVE #604
City-St-Zip: HALLANDALE, FL 33009

Title: TP () Delete
Name: PRINCE, STEVEN
Address: 619 NE 14 AVE, # 205
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: GODBOUT, WILFRED
Address: 619 NE 14TH AVE
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: KLEIMAN, LARRY
Address: 619 NE 14 AVE #706
City-St-Zip: HALLANDALE, FL

Title: D () Delete
Name: ADAMPOULOS, ERNEST
Address: 619 NE 14H AVE #308
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: AZARNIA, SIMON
Address: 619 NE 14TH AVE #604
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: PT (X) Change () Addition
Name: PRINCE, STEVEN
Address: 619 NE 14 AVE, # 205
City-St-Zip: HALLANDALE BEACH, FL 33009

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN PRINCE

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date