

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728481

FILED
Feb 13, 2009
Secretary of State

Entity Name: THE MEADOWS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

377 SW 56TH AVENUE
MARGATE, FL 33068

New Principal Place of Business:

Current Mailing Address:

377 SW 56TH AVENUE
MARGATE, FL 33068

New Mailing Address:

FEI Number: 59-1532044

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLIFKAFF, GARY A
EMMERALD LAKE COPORATE PARK
3111 STIRLING RD
FT. LAUDERDALE, FL 33312 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CUNNINGHAM, MARTINE
Address: 5641 SW 2 CT #116
City-St-Zip: MARGATE, FL 33068 US

Title: T () Delete
Name: GREFFARD, SERGE
Address: 5660 SW 3RD PLACE #204
City-St-Zip: MARGATE, FL 33068

Title: D () Delete
Name: HOUDE, GILLES
Address: 5661 SW 2ND COURT #215
City-St-Zip: MARGATE, FL 33068

Title: SD () Delete
Name: NADIF, GEORGE
Address: 375 SW 56TH AVE #104
City-St-Zip: MARGATE, FL 33068

Title: PD () Delete
Name: ZAKAIB, GEORGE
Address: 5640 SW 3RD PL #101
City-St-Zip: MARGATE, FL 33068

Title: VPD () Delete
Name: TORRES, RAY
Address: 5620 SW 3RD PLACE #102
City-St-Zip: MARGATE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: DECHAVIGNY, ANDRE
Address: 5681 SW 2D COURT
City-St-Zip: MARGATE, FL 33068

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

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

Title: VPD (X) Change () Addition
Name: DUFRESNE, GASTON
Address: 5660 SW 3RD PLACE #203
City-St-Zip: MARGATE, FL 33068

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: CJ CANFIELD

AG

02/13/2009

Electronic Signature of Signing Officer or Director

Date