FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

731382

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MEADOWI AWN DRESBYTERIAN CHIERCH, INC.

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Mar	06	1998	8:00am
Se	cret	tary o	f State

MICADOWLAWIN FRESDITERIAN						
Principal Place of Business	Mailing Address					
1770 62ND AVE NORTH ST. PETERSBURG FL 33702	1770 62ND AVE NORTH ST. PETERSBURG FL 3370	12	3. Date Incorporated or Qualified 12/13/1974			
			4. FEI Number Applied For 59-0863375 Not Applicable			
Principal Place of Business 1	2a. Mailing Address		5. Certificate of Status Desired			
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
City & State	City & State		7. Is this nonprofit corporation a homeowners association?			
Zip Country	Zip	Country	8. This corporation owes or has paid the current year lotangible			
24 25	29	30	Personal Property Tax due June 30. Yes X No 10. Name and Address of New Registered Agent			
9. Name and Address of Curre	nt Registered Agent	81 Name				
BRADEN, CARL 82 Street Address (P.O. Box Number Is Not Acceptable) 8059 21ST ST., N., B-7 82 O Q G G G UO D G EAN DE BLUDNE.						
ST. PETERSBURG FL 33714		83 5	Pe te cs burg			
•		84 City	FL 85 Zip Code			
11. Pursuant to the provisions of Sections 617.05	02 and 617.1508, Florida Statu	tes, the above-named c	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered			
agent. I am lamiliar with, and accept the oblig	pations of, Section 617.0503, Fl	orida Statutes.	Stations ocard of directors. Thereby accept the appointment as registered			
SIGNATURE Signature, typed or printed name of registered ag	umuth	TE: Registered Agent signature re	equired when reinstating) DATE			
12. OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE PD	▼ DELETE	1.1 TITLE	P.D. Change M Addition			
HAME BRADEN, CARL		1.2 NAME	L'orraine. Wermeth Blod NE			
STREET ADDRESS 6050 21ST ST N., B-7 CITY-ST-ZIP ST. PETERSBURG FL 33714		1.3 STREET ADDRESS C	St Petersburg Fla. 33703			
TITLE VD	₩ DELETE	1.4 CITY-ST-ZIP 2.1 TITUE	Change M Addition			
NAME DENNIS EAKENS	75 **	2.2 NAME	Parlara Hicks			
STREET ADDRESS 2718 16TH AVE N		2.3 STREET ADDRESS	71617-18Way X			
CITY-ST-ZIP ST PETERSBURG FL		2 4 CITY-ST-ZIP	St Peterstyra The 39400			
TITLE STD	DELETE	3.1 TITLE 3.2 NAME ST I	slith Classiton Change Wadditon			
NAME WANOUS, DOROTHY STREET ADDRESS 6015 19TH ST N., #214		3.2 NAME " 3.3 STREET ADDRESS "				
STREET ADDRESS 6015 191H S1 N., #214 CITY-ST-ZIP ST. PETERSBURG FL 33714		3.4. CITY-ST-ZIP	St Petershung Gla 93702			
TITLE	DELETE	4.1 TITLE	Change Addition			
NAME		4. 2 NAME	O			
STREET ADDRESS		4.3 STREET ADDRESS				
CITY-ST-ZIP		4.4 CITY-ST-ZIP				
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition			
NAME		5.2 NAME				
STREET ADDRESS		5.3 STREET ADDRESS				
CITY-ST-ZIP	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	☐ Change ☐ Addition			
NAME		6.2 NAME				
STREET ADDRESS		6.3 STREET ADDRESS				
CITY-ST-ZIP		6.4 CITY-ST-ZIP				
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.						