

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732249

FILED
Apr 16, 2009
Secretary of State

Entity Name: MEADOWBROOK ASSOCIATION SECTION B, INC.

Current Principal Place of Business:

1000 NE 12TH AVE
APT. 108
HALLANDALE, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

1000 NE 12TH AVE
APT. 108
HALLANDALE, FL 33009 US

New Mailing Address:

FEI Number: 59-1659409 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAGUARDIA, ROBERT
1000 NE 12 AVE. APT. 108
HALLANDALE, FL 33009 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: LAGUARDIA, P. ROBERT
Address: 1000 NE 12 AVE APT. 108
City-St-Zip: HALLANDALE, FL 33009

Title: P () Delete
Name: LAZZAR, P. YOSI
Address: 1001 NE 14 AVE APT. 108
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: MAURA, D. FRANK
Address: 1000 NE 12 AVE APT. 203
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: NIKGLAI, LADNOV
Address: 1000 NE 12 AVE APT. 506
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: MARTIN, RITA
Address: 900 NE 12TH AVE #708
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: D () Delete
Name: ALLEN, LARA
Address: 900 NE 12 AVE APT. 506
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAGUARDIA, ROBERT
Address: 1000 NE 12 AVE APT. 108
City-St-Zip: HALLANDALE, FL 33009

Title: D (X) Change () Addition
Name: LAZZAR, YOSI
Address: 1001 NE 14 AVE APT. 108
City-St-Zip: HALLANDALE, FL 33009

Title: D (X) Change () Addition
Name: MAURA, FRANK
Address: 1000 NE 12 AVE APT. 203
City-St-Zip: HALLANDALE, FL 33009

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

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

Title: D (X) Change () Addition
Name: DODEA, RADU
Address: 900 NE 12 AVE APT. 303
City-St-Zip: HALLANDALE, FL 33009

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: ROBERT LAGUARDIA

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date