2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735441

FILED Jan 20, 2009 Secretary of State

Entity Name: THE MEADOWS COMMUNITY ASSOCIATION, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

2004 LONGMEADOW SARASOTA, FL 34235

Current Mailing Address: New Mailing Address:

2004 LONGMEADOW SARASOTA, FL 34235

FEI Number: 59-1694428 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SMALLY, LEONARD 2004 LONGMEADOW SARASOTA, FL 34235

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

US

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: VD (X) Change () Addition Name: FORTIN, ERNEST V

Address: 4574 HIGHLAND OAKS CIRCLE Address: 4574 HIGHLAND OAKS CIRCLE

Office St. Zin: SARASOTA EL 24225 US

City-St-Zip: SARASOTA, FL 34235 US City-St-Zip: SARASOTA, FL 34235 US

Title: VD () Delete Title: (X) Change () Addition SAWYER, J. ANTHONY Name: SAWYER, J. ANTHONY Name: Address: 4927 WATERBRIDGE DOWN Address: 4927 WATERBRIDGE DOWN City-St-Zip: SARASOTA, FL 34235 US City-St-Zip: SARASOTA, FL 34235 US

Title: () Delete Title: (X) Change () Addition SCHWARZKOPF, JEROME NICHOLS, LAWRENCE Name: Name: 3080 HIGHLANDS BRIDGE ROAD 3016 HIGHLANDS BRIDGE RD. Address: Address: City-St-Zip: SARASOTA, FL 34235 US City-St-Zip: SARASOTA, FL 34235 US

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 BORCHERS, MAXINE
 Name:
 COVENEY, VIRGINIA

 Address:
 3408 HIGHLANDS BRIDGE RD
 Address:
 4501 OAKLEY GREENE

 City-St-Zip:
 SARASOTA, FL 34235 US
 City-St-Zip:
 SARASOTA, FL 34235 US

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: J. ANTHONY SAWYER PD 01/20/2009