## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#736187** 

FILED Apr 02, 2009 Secretary of State

Entity Name: MEADOWBROOK LAKES CONDOMINIUM APARTMENTS, BUILDING #6, INC.

Current Principal Place of Business:				New Principal Place of Business:		
205 SE. 11TH TERRACE DANIA, FL 33004				205 SE. 11TH TERRACE APT 305 DANIA, FL 33004		
Current Mailing Address:				New Mailing Address:		
205 SE. 11 APT 305 DANIA, FL	TH TERRACE 33004					
FEI Number:	59-1726028	FEI Number Applied For ( )	FEI Num	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:		Name and Address of	of New Registered Agent:	
SUAREZ, RAMON 205 SE. 11TH TERRACE 305 DANIA BEACH, FL 33004 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: Electronic Signature of Registered Agent				 Date		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ROLLI, CHRISTI 205 SE 11TH TE DANIA, FL 3300  T () SUAREZ, RAMO 205 SE 11TH TE DANIA, FL 3300  P () ROLLI, ANGELO 205 SE 11TH TE DANIA, FL 3300  VP () LOCONTO, TON	ER-APT 205 Delete N ERR APT 305 Delete CERRACE APT 205 Delete Y ERRACE APT #403		Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition  ( ) Change ( ) Addition  ( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DICREASE, THO	ERRACE APT 304		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ANGELO A ROLLI P 04/02/2009