2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737658

FILED Feb 10, 2009 Secretary of State

Entity Name: MEADOWLAKE CONDOMINIUM ASSOCIATION, INC.

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

5516 BURNT BRANCH CIR SARASOTA, FL 34232 US

Current Mailing Address: New Mailing Address:

5317 FRUITVILLE RD SUITE 228 SARASOTA, FL 34232

FEI Number: 59-1749409 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:

ALLURE PROPERTY MANAGEMENT, INC. 5516 BURNT BRANCH CIR SARASOTA, FL 34232 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:

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Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SMITH, TOM
 Name:
 L'HEUREUX, BRIGITTE

 Address:
 2453 CRISPIN COURT
 Address:
 5516 BURNT BRANCH CIRCLE

 City-St-Zip:
 SARASOTA, FL 34235
 SARASOTA, FL 34232

Title: VP () Delete Title: VP (X) Change () Addition Name: FITZ, JAMES P Name: REDFORD, LEN Address: 2335 LAKESIDE NEWS Address: 5516 BURNT BRANCH CIRCLE

Address: 2335 LAKESIDE NEWS Address: 3516 BORNT BRANCH CIRCLE
City-St-Zip: SARASOTA, FL 34235 City-St-Zip: SARASOTA, FL 34232

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

 Name:
 TUTT, SAM
 Name:
 FITZPATRICK, JAMES D

 Address:
 2351 LAKESIDE NEWS
 Address:
 5516 BURNT BRANCH CIRCLE

 City-St-Zip:
 SARASOTA, FL 34235
 City-St-Zip:
 SARASOTA, FL 34232

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

Name:REDFORD, LEONARDName:MENOLASINO, S. MARIEAddress:2671 GREENBELT YARDAddress:5516 BURNT BRANCH CIRCLE

City-St-Zip: SARASOTA, FL 34235 City-St-Zip: SARASOTA, FL 34232

Name: SHEPARD, KEN Name: HAGENAH, GAIL

Address: 2621 GREENBELT YARD Address: 5516 BURNT BRANCH CIRCLE
City-St-Zip: SARASOTA, FL 34235 City-St-Zip: SARASOTA, FL 34232

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: JAMES D FITZPATRICK PRES 02/10/2009