

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737752

FILED
Apr 20, 2006
Secretary of State

Entity Name: MEADOWS OF KANAPAH OWNERSHIP ASSOCIATION, INC.

Current Principal Place of Business:

5522 NW 43RD ST
GAINESVILLE, FL 32653 US

New Principal Place of Business:

5522 NW 43RD ST
SUITE B
GAINESVILLE, FL 32653 US

Current Mailing Address:

5522 NW 43RD ST
GAINESVILLE, FL 32653 US

New Mailing Address:

5522 NW 43RD ST
SUITE B
GAINESVILLE, FL 32653 US

FEI Number: 59-2913078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TENAGLIA, RICHARD A
C/O BOSSHARDT PROPERTY MGT.
5522 - B NW 43RD ST.
GAINESVILLE, FL 32653 US

Name and Address of New Registered Agent:

RHINESMITH, PATRICIA
C/O BOSSHARDT PROPERTY MGT.
5522 - B NW 43RD ST.
GAINESVILLE, FL 32653 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: PATRICIA RHINESMITH

04/20/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: PRAGER, JOE
Address: 9409 SW 81ST WAY
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: HILL, ANN
Address: 9210 SW 129TH ST
City-St-Zip: ARCHER, FL 32618

Title: TD () Delete
Name: WALT, JUDD
Address: 7830 SW 90TH LANE
City-St-Zip: GAINESVILLE, FL 32608

Title: PD () Delete
Name: DAVENPORT, PAUL
Address: 7928 SW 90TH LN
City-St-Zip: GAINESVILLE, FL 32608

Title: ALD () Delete
Name: MILLER, DAVID
Address: 5517 SW 69TH TERR
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: PAUL DAVENPORT

PD

04/20/2006

Electronic Signature of Signing Officer or Director

Date