

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743057

FILED
Apr 25, 2011
Secretary of State

Entity Name: MEADOWBROOK A,B,C,D, INC.

Current Principal Place of Business:

219 NE 14TH AVE
HALLANDALE, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

219 NE 14TH AVE
HALLANDALE, FL 33009 US

New Mailing Address:

FEI Number: 59-1874839

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIZMADIA, SHEILA
219 NE 14TH AVE
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: DP
Name: LIPSENTHAL, ROBERT
Address: 232 NE 12TH AVE
City-St-Zip: HALLANDALE, FL 33009

Title: VD
Name: TODOROV, TODOR
Address: 233 N.E. 14TH AVENUE
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: V
Name: LAURINO, JOSEPH
Address: 232 NE 12TH AVE
City-St-Zip: HALLANDALE, FL 33009

Title: DT
Name: MARCUS, JUDITH
Address: 232 NE 12TH AVE
City-St-Zip: HALLANDALE, FL 33009

Title: DS
Name: CIZMADIA, SHEILA
Address: 219 NE 14TH AVE
City-St-Zip: HALLANDALE, FL 33009

Title: D
Name: DRAGIF, ANNA
Address: 219 NE 14TH AVE
City-St-Zip: HALLANDALE, FL 33009

I hereby 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 all other like empowered.

SIGNATURE: SHEILA CIZMADIA

DS

04/25/2011

Electronic Signature of Signing Officer or Director

Date