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Mar 12 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 750926 (8)

1. Corporation Name
MEADOWRIDGE LAKE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2387 SW 15TH ST. DEERFIELD BEACH FL 33442	2387 SW 15TH ST. DEERFIELD BEACH FL 33442

3. Date Incorporated or Qualified: 02/04/1980

4. FEI Number: 59-2162428 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MAYKA, STEPHEN
2387 SW 15TH ST
DEERFIELD BCH. FL 33442

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	SD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	FOUTS, JAMES		1.2 NAME		
STREET ADDRESS	1266 SW MILITARY TRAIL #517		1.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL		1.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	CAMUS, SYLVIA		2.2 NAME		
STREET ADDRESS	2387 SW 15TH ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH, FL00000		2.4 CITY-ST-ZIP		
TITLE	PDD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	MAYKA, STEPHEN		3.2 NAME		
STREET ADDRESS	1993 SW 15TH ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BCH FL		3.4 CITY-ST-ZIP		
TITLE	VPD	☒ DELETE	4.1 TITLE	Kevin Parker	☒ Change ☐ Addition
NAME	~~BARST, LYNN~~		4.2 NAME		
STREET ADDRESS	~~1208 S MILITARY TRAIL~~		4.3 STREET ADDRESS	1208 S. Military Trail	
CITY-ST-ZIP	~~DEERFIELD BCH FL~~		4.4 CITY-ST-ZIP	Deerfield Beach, FL 33442	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	100002456221	
STREET ADDRESS			5.3 STREET ADDRESS	-03/13/98--01014--007	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	***61.25	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	PE 3-12	
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on any attachment with an address.

SIGNATURE: [signature] Treasurer 3/6/98 954-421-1404