2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#751249

FILED Apr 05, 2009 Secretary of State

Entity Name: THE MEADOWS OF TARPON WOODS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3358 TANGLEWOOD TRAIL PALM HARBOR, FL 34685 **Current Mailing Address: New Mailing Address:** 3311 TANGLEWOOD TRL PALM HARBOR, FL 34685 US FEI Number: 59-2213622 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: HILL, EMILY 3311 TANGLEWOOD TRAIL PALM HARBOR, FL 34685 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: () Delete (X) Change () Addition PAINTER, ROBERT E PAINTER, ROBERT Name: Name: 3023 BOLT DRIVE Address: 3023 BOLT DRIVE Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: PALM HARBOR, FL 34685 Title: Title: () Delete () Change () Addition BRYANT, GREG Name: Name: Address: 3055 BOLT DR Address: City-St-Zip: PALM HABOR, FL 34685 City-St-Zip: Title: () Delete Title: () Change () Addition GRAVES, JACK Name: Name: Address: 3071 BOLT DRIVE Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: Title: DV () Delete Title: () Change () Addition Name: PRESTON, DON Name: 3310 TANGLEWOOD TR Address: Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: Title: () Delete Title: () Change () Addition D'AVANZO, SUSAN Name: Name: 3222 TANGLEWOOD TRAIL Address: Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: Title: () Delete Title: (X) Change () Addition KOLB, RICHARD HILL. EMILY Name: Name: Address: 3311 TANGLEWOOD TRAIL Address: 3311 TANGLEWOOD TRAIL PALM HARBOR, FL 34685 PALM HARBOR, FL 34685 City-St-Zip: City-St-Zip:

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: EMILY HILL T 04/05/2009