2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Mar 19, 2004 8:00 am Secretary of State **DOCUMENT #751981** 03-19-2004 90060 042 ****61.25 MEADOW WOOD HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address PO BOX 7610 **4811 GEORGIA AVE** 74096000 WEST PALM BEACH, FL 33405 WEST PALM BEACH, FL 33405 2. Principal Place of Business 1988 LAKE Worth Suite, Apt. #, etc. Suite, Apt. #, etc 01192004 CR2E037 (10/03) 4. FEI Numbe Applied For 59-1989414 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Name and Address of Current Registered Agent Name and Address of New Registered Agent LADWIG ESQ, PATTI H Box Number is Not Acceptable) 12765 WEST FOREST HILL BLVD **STE 1312** WEST PALM BEACH, FL 33414 8. The above named entry separates this statement for the purpose of changing its registered office or registered age wor both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 3-16-04 SIGNATURE tered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee Is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PD PD **D**elete TITLE TITLE CArlo Grosso 1350 Longlea Terrace 1350 Longlea Terrace CAMERLINCK, BOB NAME NAME 15795 MEADOWWOOD DR STREET ADDRESS STREET ADDRESS Welling ton CITY-ST-ZIP WEST PALM BEACH, FL 33414 CITY-ST-ZIP Delete VPD TITLE TITLE ☐ Change ☐ Addition ODELL, MIKE RICK Elsner 15485 MEADOW WOOD DRIVE NAME NAME 1315 WOOD DALE TERR STREET ADDRESS STREET ADDRESS WELLINGTON, FL 33414 CITY-ST-ZIP CITY-ST-71P Wellington, FL 33414 Delete TITLE TITI F ☐ Change ☐ Addition MARK Levin 15490 Mendow Wood Drive FINNEGAN, LAUREL NAME NAME STREET ADDRESS 15770 MEADOW WOOD DRIVE STREET ADDRESS WELLINGTON, FL 33414 CITY-ST-ZIF CITY-ST-ZIP Wellington, FL 33414 Delete TITLE TITLE ☐ Addition LYNN Lovett BIERCE, NED NAME NAME 15900 Spring 15790 MEADOW WOOD DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WELLINGTON, FL 33414 CITY-ST-ZIP Uellinaton Delete ☐ Change TITLE ■ Addition GALO, DAN Victor Henry NAME NAME STREET ADDRESS 15715 MEADOW WOOD DRIVE STREET ADDRESS 15405 MEADOW Wood DRIVE CITY-ST-ZIP WELLINGTON, FL 33414 CITY-ST-ZIP Delete ☐ Change TITLE TITLE ☐ Addition FRASCOTIA, SCOTT NAME NAME STREET ADDRESS 15825 MEADOW WOOD DR STREET ADDRESS WEST PALM BEACH, FL. 33414 CITY-ST-7(P CITY-ST-ZIP 12. 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 report or supplemental teport 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. <u>3-16-04</u> SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

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