2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# 751981

Entity Name: MEADOW WOOD HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

13833 WELLINGTON TRACE, E4
PMB #220
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

13833 WELLINGTON TRACE, E4
PMB #220
WELLINGTON, FL 33414 US

New Mailing Address:

FEI Number: 59-1989414 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GATSOS, ELAINE M ESQ.
1499 WEST PALMETTO PARK ROAD
SUITE 210
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

SILVESTRI, LAWRENCE
15180 MEADOW WOOD DRIVE
WELLINGTON, FL 33414 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: LAWRENCE SILVESTRI 05/01/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LEVIN, MARK
Address: 15490 MEADOW WOOD DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: VPD ( ) Delete
Name: POMEROY, WAYNE
Address: 15720 MEADOW WOOD DR.
City-St-Zip: WELLINGTON, FL 33414

Title: SD ( ) Delete
Name: HENRY, VICTOR
Address: 15465 MEADOW WOOD DR.
City-St-Zip: WELLINGTON, FL 33414

Title: TD (X) Delete
Name: LOVETT, LYNN
Address: 15900 SPRINGHILL COURT
City-St-Zip: WELLINGTON, FL 33414

Title: D (X) Delete
Name: BORG, CHARLES
Address: 15805 MEADOW WOOD DR.
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GILBERT, ROBERT
Address: 15660 ROLLING MEADOW CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: SD (X) Change ( ) Addition
Name: SILVESTRI, LAWRENCE
Address: 15180 MEADOW WOOD DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: TD (X) Change ( ) Addition
Name: ELLIS, MARK
Address: 1530 WOOD DALE TERR
City-St-Zip: WELLINGTON, FL 33414

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: ROBERT GILBERT PD 05/01/2006
Electronic Signature of Signing Officer or Director Date