## 751981

(Re	equestor's Name)	
(Address)		
*		
(Address)		
<b>(</b>	····,	
(6)	hulChata (7 in IDhana	
(Ch	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	. MAIL
(Bu	siness Entity Nan	ne)
(Dc	cument Number)	
(50		
Certified Copies Certificates of Status		
	•	
Special Instructions to	Filing Officer:	
·	_	





000103279550

05/29/07--01053--029 \*\*35.00

O7 MAY 29 AM II: 32

West of

## **COVER LETTER**

Division of Corporations
SUBJECT: Meadow Wood Homeowners' Association, Inc
DOCUMENT NUMBER: 751981
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Patti Heidler Ladwig, Esq.  (Name of Contact Person)  Patti Heidler Ladwig, P.A.  (Firm/Company)
12765 W. Forest Hill Blvd Swite 1312
Wellington, FL 33414 (City/State and Zip Code)
For further information concerning this matter, please call:
Path Heidler Ladwig at (561), 333.1826 (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida.  in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Meadow Wood Homeowners' Association, Ir
2. The principal office address: 13833 Wellington Trace, E4 PMB #220
Wellington FL 33414 US
3. The mailing address (if different):
4. Date of incorporation/qualification: 4/14/1980 Document number: 75/98/
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Lawrence Silvestri
15180 Meadow Wood Dr.
Wylington FL 33414
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Path Heidler Ladwig, Esq.  12765 W Forest Hill Blvd. Suite 1312  (P.O. Box NOT acceptable)
Wellington, FL 33414
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.  (Signature of an officer or director)  (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) 5/18/07 (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

\* \* \* FILING FEE: \$35.00 \* \* \*