2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 16, 2007
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 ( )**

Name and Address of Current Registered Agent:

HEIDLER LADWIG, PATTI
12765 W. FOREST HILL BLVD.,SUITE 1312
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

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:

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

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

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

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: STEWARD, ELIZABETH
Address: 15570 MEADOW WOOD DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: TD (X) Change ( ) Addition
Name: METCALF, DAVID
Address: 1495 WOOD ROW WAY
City-St-Zip: WELLINGTON, FL 33414

Title: VPD ( ) Change (X) Addition
Name: CAMERLINCK, ROBERT
Address: 15795 MEADOW WOOD DR.
City-St-Zip: WELLINGTON, FL 33414

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: ROBERT CAMERLINCK VPD 11/16/2007

Electronic Signature of Signing Officer or Director — Date