FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

2/8/96 941-792-8612_

1996

SIGNATURE: _

DOCUMENT #
1. Corporation Name

758153

(1)

CONDOMINIUM OWNERS ASSOCIATION OF MEADOWCROFT SO UTH, INC.

| P.O. BOX 106 BRADENTON I | | P.O. BOX 10674 BRADENTON FL 34282 | • | | |
|---|--|--|---|--|--|
| | 1 6 67206 | DUMPENION LE 24505 | | | |
| 2. Principal Pla | | DRADENIUM PE 34282 | | | |
| Principal Pla | | | | 3. Date Incorporated or Qualified 10/26/1981 | 3a. Date of Last Report 01/24/1995 |
| \neg | ce of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 | E-1-1-1 | 26 | | 59-2150093 | Not Applicable |
| Suite, Apt. # | F, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | S8.75 Additional Fee Required |
| City & State | | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | | 28 | | Trust Fund Contribution | Added to Fees |
| Zip | Country | Zıp | Country | 8. This corporation has liability for int | |
| 24 | 25 | 29 | 30 | | Yes No |
| • | 9. Name and Address of Curre | ent Hegistered Agent | 81 Name | 10. Name and Address of New Re | gistered Agent |
| Cac CO | AIDO MANAME CEDA INO | | 81 Name | | |
| | NDO MGMNT. SERV. INC. | | 82 Street Add | dress (P.O. Box Number is Not Acceptable |) |
| 4301 32ND ST. W. SUITE E-14 BRADENTON FL 34282 | | | 63 | | |
| DRADENTON FL 34202 | | | | | |
| | | | 84 City | | FL 85 Zip Code |
| 11. Pursuant to | the provisions of Sections 617.050 | 02 and 617 1508. Florida Statut | es the above named corro | pration submits this statement for the purpo | one of observing its assistant of all as |
| orregistere | ed agent, or both, in the State of Flo n, and accept the obligations of, Sec | nda. Such change was authoriz | ed by the corporation's boa | and of directors. Thereby accept the appoin | ntment as registered agent. I am |
| | i, and accept the obligations of, sec | Mon b 11.0000, Florida Statutes | ò. | | |
| SIGNATURE _ | Signature, typed or printed name of registered age | nt and little if applicable (NC | OTE: Registered Agent signature require | red when reinstating): | DATE |
| 12. | | ND DIRECTORS | 13. | ADDITIONS CHANGES TO OFFICE | |
| TITLE | DP | □ DELE FE | 1.1 TITLE | | Change Addition |
| NAME | Katzman, Herbert | | 1.2 NAME | | |
| STREET ADDRESS | 6218 29TH AVE. W. | | 1 3 STREET ADDRESS | | |
| CITY-S1-ZIP | BRADENTON FL 34209 | | 1.4 CITY - ST - ZIP | | |
| TITLE | DV | DELETE | 2 1 TITLE | | Change Addition |
| NAME | VANKUIKEN, DOROTHY | | 2 2 NAME | | |
| STREET ADDRESS | 6119 HERITAGE LANE | | 2 3 STREET ADDRESS | | |
| CITY-ST-ZIP | BRADENTON FL 34209 DST | . 🗀००० | 2 4 CITY - ST - ZIP | | |
| T-TLE NAME | JOHNSTON, JEANNE | DELETE | 3 1 TITLE | | Change Addition |
| STREET ADDRESS | 6214 29TH AVE. W. | | 3 2 NAME | | |
| City-St-ZiP | BRADENTON FL 34209 | | 3 3 STREET ADDRESS | | |
| TITLE | D | DELETE | 3.4 CHTY-ST-ZIP | | Change Addition |
| NAME | BENNETT, AL | | 4 2 NAME | | |
| STREET ADDRESS | 6344 29TH AVE. W. | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | BRADENTON FL 34209 | | 4.4 CITY - ST - ZIP | | |
| T-TLE | D | DELETE | 51 TITLE | , | Change Addition |
| NAME | WILHELM, DONNA | | 5.2 NAME | | · · _ |
| STREET ADDRESS | 6307 HERITAGE LANE | | 5.3 STREET ADDRESS | | |
| CITY -ST - ZIP | BRADENTON FL 34209 | | 5.4 CITY - ST - ZIP | | |
| TIFLE | | DELETE | 6 1 TITLE | | Change Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY - ST - ZIP | and the state of t | | 6 4 CITY - S1 - ZIP | for the exemption stated in Section 119.07 | |
| 11 1 do barot | r carrier trial the information elimblica | carronal attack and the contract of the contra | | the tipe assessment as about 1 Country at 0 07 | |