FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

758153

(1)

CONDOMINIUM OWNERS ASSOCIATION OF MEADOWCROFT SO UTH, INC.

UTH, II	NC.						
Principal Place	e of Business	Mailing Address			IB IIIA BIBIK DIBIK DADA BIK	JII 01011 BIBIF 1001	
P.O. BOX 1067 BRADENTON F		P.O. BOX 10674 BRADENTON FL 34282-0674	P.O. BOX 10674 BRADENTON FL 34282-0674				
					3. Date Incorporated or Qualified 10/26/1981	3a. Date of Las 02/15/	t Report 1 1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		59-2150093		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		5 Additional Required	
City & State		City & State		6. Election Campaign Financing			
23		28		Trust Fund Contribution		00 May Be ed to Fees	
Zip	Country Zip Co		Country	/	8. This corporation has liability for intangible tax under s. 199.032,		
24	25		30			Yes No	
	9. Name and Address of Curre	nt Registered Agent	81	T No.	10. Name and Address of New R	egistered Agent	
000.00	WAS HOUSE OFFICE HIS		81	Name			
CAS CONDO MGMNT. SERV. INC.				Street Addr	ess (P.O. Box Number is Not Accepta	ble)	
4301 32ND ST. W. SUITE E-14 BRADENTON FL 34282			83				
BHADENTUN FL 34282			L	Sui	te C-7	· · · · · · · · · · · · · · · · · · ·	
			84	City		FL 85 Z	ip Code
11. Pyrsuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Statute	s, the abov	e-named corp	oration submits this statement for the	purpose of changin	g its registered
office or re agent. Fai	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was a jations of, Section 617,0503, Flo	uthorized b rida Statute	y the corporati s.	ion's board of directors. I hereby acce	pt the appointment	as registered
SIGNATURE	, ·	•					
	Signature, typed or printed name of registered ag			ent signature requir	ad when reinstating)	DATE	
12. 10LE	OFFICERS AN	ID DIRECTORS DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECT	
NAME	Katzman, Herbert	Д опис	1.2 NAME				je 🗀 Radillori
STREET ADDRESS	6218 29TH AVE. W.			ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34209		1.4 CITY-1				
TITLE	DV	DELETE 2.1 T		7. 2.1		☐ Chang	ge Addition
NAME			2.2 NAME				
STREET ADORESS	AAAA MAANA AAA AAMA		2.3 STREE	ADDRESS			
CITY-ST-ZIP			2. 4 CITY -	ST-ZIP			
THTLE	_		3.1 TITLE			Chang	ge 🔲 Addition
NAME	JOHNSTON, JEANNE		3.2 NAME				
STREET ADDRESS	6214 29TH AVE. W.			ADDRESS	•		
CITY-ST-ZIP	BRADENTON FL 34209	☐ DELETE	3.4. CITY -	ST-ZIP			No. 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
TITLE	D DENINETT AL	T DELETE	4.1 TITLE			∟ Chang	ge Addition
NAME STOCET ADDRESS	BENNETT, AL		4. 2 NAME				
STREET ADDRESS CITY-ST-ZIP	6344 29TH AVE. W. BRADENTON FL 34209			ADDRESS			
TITLE	D	DELETE	4.4 CITY - S	oi • £iF		Chang	ge Addition
NAME	WILHELM, DONNA		5.2 NAME				
STREET ADORESS	6307 HERITAGE LANE			ADDRESS			
CHY-ST-ZIP	BRADENTON FL 34209		5.4 CITY - 5				
TITLE		☐ DELETE	6.1 TITLE			Chang	ge 🔲 Addition
NAME		·	6.2 NAME		•		
STREET ADDRESS			6.3 STREE	ADDRESS			
CITY-ST-ZIP			6.4 CITY - 5	ST-ZIP			

14. I do 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 annual report or supplemental annual report 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Feb 28 1997 8:00am

Secretary of State