

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 15, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 758153**

1. Entity Name  
**CONDOMINIUM OWNERS ASSOCIATION OF  
MEADOWCROFT SOUTH, INC.**



Principal Place of Business

**4301 32ND ST W.  
SUITE A-20  
BRADENTON, FL 34205**

Mailing Address

**4301 32ND ST W.  
SUITE A-20  
BRADENTON, FL 34205**

**DO NOT WRITE IN THIS SPACE**



01232008 No Chg-NP

CR2E037 (4/06)

4. FEI Number  
**59-2150093**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**C&S CONDO MGMNT. SERV. INC.  
4301 32ND ST. W.  
STE A20  
BRADENTON, FL 34205**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee Is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DST  
JOHNSTON, JEANNE  
6214 29TH AVE. W.  
BRADENTON, FL 34209**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
GIARD, MILTON  
6318 29TH AVE W  
BRADENTON, FL 34209**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
WILHELM, DONNA  
6307 HERITAGE LANE  
BRADENTON, FL 34209**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DP  
YOUNG, LEWIS  
6511 HERITAGE LN  
BRADENTON, FL 34209**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DV  
BALDWIN, CAROL  
6407 HERITAGE LANE  
BRADENTON, FL 34209**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000823664  
02/26/08-80051-010 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Jeanne Johnston*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*2/12/08*

Date

Daytime Phone #