

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766324

FILED
Apr 27, 2008
Secretary of State

Entity Name: MEADOWLAND OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

MEADOWLAND CIRCLE
SARASOTA, FL 34276

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 21382
SARASOTA, FL 34276

New Mailing Address:

FEI Number: 59-2281280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOWASKI, GREGORY
4344 MEADOWLAND CR.
SARASOTA, FL 34233 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: TD () Delete
Name: REED, CHRIS
Address: 4366 MEADOWLAND CIRCLE
City-St-Zip: SARASOTA, FL 34233

Title: PD () Delete
Name: SCHAEFFER, ROBERT
Address: 4359 MEADOWLAND CIR
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: NOWASKI, GREGORY
Address: 4344 MEADOWLAND CR.
City-St-Zip: SARASOTA, FL 34233

Title: VP () Delete
Name: SUCH, CHARLES
Address: 4339 MEADOWLAND CR.
City-St-Zip: SARASOTA, FL 34233

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: GUNTHER, MARK
Address: 4342 MEADOWLAND CIR
City-St-Zip: SARASOTA, FL 34233

Title: VP (X) Change () Addition
Name: NOWASKI, GREGORY
Address: 4344 MEADOWLAND CR.
City-St-Zip: SARASOTA, FL 34233

Title: SC (X) Change () Addition
Name: JOHANSSON, VIRGINIA
Address: 4320 MEADOWLAND CR.
City-St-Zip: SARASOTA, FL 34233

Title: D () Change (X) Addition
Name: BUTTON, KEVIN
Address: 4330 MEADOWLAND CR.
City-St-Zip: SARASOTA, FL 34233

Title: D () Change (X) Addition
Name: PINNEY, NILES
Address: 4341 MEADOWLAND CR.
City-St-Zip: SARASOTA, FL 34233

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: CHRISTINE REED

TRES

04/27/2008

Electronic Signature of Signing Officer or Director

Date