

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L57481 (8)

1. Corporation Name

MEADOW WOOD HOLDINGS, INC.



Principal Place of Business

% THE MEADOW WOOD COMPANIES
200 S. HOOVER BLVD. #201-110
TAMPA FL 33609
US

Mailing Address

% THE MEADOW WOOD COMPANIES
200 S. HOOVER BLVD. #201-110
TAMPA FL 33609
US

3. Date Incorporated or Qualified
03/15/1990

3a. Date of Last Report
08/14/1995

2. Principal Place of Business

21 SAME

2a. Mailing Address

26 SAME

4. FEI Number

59-2999216

Applied For

Not Applicable

Suite, Apt. #, etc.

22 CHANGE SUITE TO #201-110

City & State

23 SAME

Zip

24 SAME

Country

25 SAME

26 SAME

27 CHANGE SUITE TO #201-110

City & State

28 SAME

Zip

29 SAME

Country

30 SAME

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

NORBOM, BENJAMIN E.
200 S. HOOVER BLVD., STE. #201-110
TAMPA FL 33609

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME NORBOM, BENJAMIN E.

STREET ADDRESS 200 SOUTH HOOVER BLVD., #201-110

CITY-ST-ZIP TAMPA FL

TITLE DVP ☐ DELETE

NAME ROSENWASSER, MARC J

STREET ADDRESS 200 S. HOOVER BLVD., STE. #201-110

CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change ☐ Addition

CHANGE SUITE TO #201-110

Change ☐ Addition

CHANGE SUITE TO #201-110

Change ☐ Addition

Change ☐ Addition

Change ☐ Addition

Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated in 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13, as indicated, or on an attachment with an address.

SIGNATURE: *W. P. Rosenwasser* V.P.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-96

Date

813-289-2900

Daytime Phone

X405

CR2E034 (12/95)