

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2005 8:00 am
Secretary of State

05-13-2005 90230 006 ****70.00

DOCUMENT # N00000001900

1. Entity Name
MEADOW WOOD TRAILS OWNERS' ASSOCIATION, INC.



Principal Place of Business
~~XXXXXX~~
~~XXXXXX~~

Mailing Address
~~XXXXXX~~
~~XXXXXX~~

50052595



2. Principal Place of Business

4450 SW 53rd place

3. Mailing Address

4450 SW 53rd place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01192005

Chg-NP

CR2E037 (10/03)

City & State

Trenton FL 32693

City & State

Trenton FL

4. FEI Number

59-3634633

Applied For

☒ Not Applicable

Zip

32693

Country

USA

Zip

32693

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

TOWERS, TERRIE
4450 SW 53RD PLACE
TRENTON, FL 32693

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D
NAME BURT, PAMELA
STREET ADDRESS 114 NE 1ST STREET
CITY-ST-ZIP TRENTON, FL 32693 ☒ Delete

TITLE DVPT
NAME DAY, ARTHUR L
STREET ADDRESS 2300 NW 29TH STREET
CITY-ST-ZIP GAINESVILLE, FL 32605 ☒ Delete

TITLE DP
NAME BURT, THEODORE M
STREET ADDRESS 114 NE FIRST STREET
CITY-ST-ZIP TRENTON, FL 32693 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Kevin Johnson
NAME
STREET ADDRESS 4200 SW 53rd place
CITY-ST-ZIP Trenton FL 32693 ☐ Change ☒ Addition

TITLE Gregory Brillett
NAME
STREET ADDRESS 13001 SW 16th ct
CITY-ST-ZIP Davie FL 33325 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I 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 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:

(Signature) (President)

5-10-05

352-463-1444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT

50052595
#N00000000/900

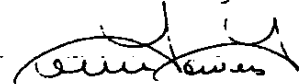
5-10-05

Division of Corporations,

The last acting agent Mr. Ted Burt, wrote me today that they were contacted by your office and found that this filing had not been made. Being my first year ever running an Assoc. I took all the Book to an accountant the 1st week of March. Apparently he has not looked at my package or something and hasn't filed this or let me know how to do it.

So please forgive the late timing of this filing & I hope it is filed properly. If not please feel free to contact me @ 352-463-1444 Fax 352-463-0003

Sincerely



Terrie Towers

President (HOP)

Meadow Wood Trails