2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003746

FILED Apr 24, 2007 Secretary of State

Entity Name: COTTAGES AT MEADOWBROOKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

9887 FOURTH STREET NORTH SUITE 301 ST. PETERSBURG, FL 33702

Current Mailing Address: New Mailing Address:

10033 DR. M. L. KING JR. STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702
9887 FOURTH STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702

FEI Number: 51-0483040 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAMPART PROPERTIES, INC. 9887 FOURTH STREET NORTH SUITE 301 ST. PETERSBURG, FL 33702 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 WESLEY, WALLACE
 Name:
 ROELANT, FRANK

 Address:
 9887 FOURTH STREET NORTH
 Address:
 9887 FOURTH STREET NORTH

City-St-Zip: ST. PETERSBURG, FL 33703 City-St-Zip: ST. PETERSBURG, FL 33703

Title: VPD () Delete Title: VPD (X) Change () Addition Name: ROELANT, FRANK Name: WATSON, BILLY

Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702
ST. PETERSBURG, FL 33702

Title: TSD () Delete Title: TSD (X) Change () Addition

 Name:
 BURKEL, NICK
 Name:
 HELWEG, BETH

 Address:
 9887 FOURTH STREET NORTH
 Address:
 9887 FOURTH STREET NORTH

 City-St-Zip:
 ST. PETERSBURG, FL 33702
 City-St-Zip:
 ST. PETERSBURG, FL 33702

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: FRANK ROELANT P 04/24/2007