## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000006341

Entity Name: FRIENDS OF MEAD GARDEN, INC.

FILED Jul 21, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
	NNING DRIVE ARK, FL 32789		
Current Mailing Address:		New Mailing Address:	
POST OFFICE BOX 272 WINTER PARK, FL 327900272		POST OFFICE BOX 1227 WINTER PARK, FL 327901227	
	20-0198727 FEI Number Applied For ( ) FEI Number with s. 607.193(2)(b), F.S., the corporation did not receive Address of Current Registered Agent:	-	Certificate of Status Desired ( )  of New Registered Agent:
Name and	Address of Current Registered Agent.	Name and Address o	n New Registered Agent.
1033 CREE	, BEVERLY EKS BEND DRIVE ERRY, FL 32707 US		
The above in the State	named entity submits this statement for the purpose of Florida.	of changing its registere	d office or registered agent, or both,
SIGNATUR	RE:		
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete LASSITER, BEVERLY 1033 CREEKS BEND DRIVE CASSELBERRY, FL 32707	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VD (X) Delete HILLE, CAROL 1631 BARCELONA WAY WINTER PARK, FL 32789	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VD ( ) Delete KEEN, LINDA 1312 BRIDGEPORT DRIVE WINTER PARK, FL 32789	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VD () Delete BLYDENBURGH, JEFF 127 W FAIRBANKS AVENUE #450 WINTER PARK, FL 32789	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TD () Delete MEHERG, ROBERT W 706 GLEN EAGLE DRIVE WINTER SPRINGS, FL 32708	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SD () Delete REKER, JAN 1660 JOELINE COURT WINTER PARK, FL 32789	Title: Name: Address: City-St-Zip:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT W. MEHERG TD 07/21/2006