

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002785

FILED
Mar 21, 2005
Secretary of State

Entity Name: SOUTHMEADOW HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O CENTEX HOMES
385 DOUGLAS AVENUE, SUITE 2000
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

C/O CENTEX HOMES
385 DOUGLAS AVENUE, SUITE 2000
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CENTEX HOMES
385 DOUGLAS AVENUE
SUITE 2000
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

SUTHERLAND MANAGEMENT, INC
107 NORTH LINE DRIVE
APOPKA, FL 32703 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: THERESA SUTHERLAND

03/21/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MAKRANSKY, JAMES
Address: 385 DOUGLAS AVENUE, SUITE 2000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D () Delete
Name: LUNDEQUAM, BRETT
Address: 385 DOUGLAS AVENUE, SUITE 2000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D () Delete
Name: FARMER, SHIRLEY
Address: 385 DOUGLAS AVENUE, SUITE 2000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHEELER, LAWRENCE M
Address: 385 DOUGLAS AVENUE, SUITE 2000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP (X) Change () Addition
Name: LUNDEQUAM, BRETT
Address: 385 DOUGLAS AVENUE, SUITE 2000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S/T (X) Change () Addition
Name: RIGGS, DEBBIE
Address: 385 DOUGLAS AVENUE, SUITE 2000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LAWRENCE M. SHEELER

P

03/21/2005

Electronic Signature of Signing Officer or Director

Date