## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000002100

FILED Jan 03, 2008 Secretary of State

Entity Name: THE MEADOWS OF LARGO HOMEOWNERS' ASSOCIATION, INC.

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

1721 RAINBOW DR 14990 ALAN CT CLEARWATER, FL 33755 LARGO, FL 33771

Current Mailing Address: New Mailing Address:

8009 SOUTH ORANGE AVE 14990 ALAN CT ORLANDO, FL 32809 LARGO, FL 33771

FEI Number: 20-3217995 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:

LELAND MANAGEMENT INC.

8009 SOUTH ORANGE AVE
ORLANDO, FL 32809 US

LINDA J. LEIGH
14990 ALAN CT
LARGO, FL 33771 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: LINDA J. LEIGH 01/03/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition Name: VERNON, JAMES M Name: LEIGH, LINDA J

 Address:
 1721 RAÍNBOW DR
 Address:
 14990 ALAN CT

 City-St-Zip:
 CLEARWATER, FL 33755
 City-St-Zip:
 LARGO, FL 33771

Title: DVP ( ) Delete Title: DVP (X) Change ( ) Addition Name: COHEN, STUART Name: ST LEWIS, SELWYN

 Address:
 1721 RAINBOW DR
 Address:
 11046 LYNN LAKE CIRCLE

 City-St-Zip:
 CLEARWATER, FL 33755
 City-St-Zip:
 TAMPA, FL 33625

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

 Name:
 Name:
 BROGAN, ERICKA

 Address:
 Address:
 4038 ALAN DR

 City-St-Zip:
 City-St-Zip:
 LARGO, FL 33771

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: LINDA J. LEIGH PRES 01/03/2008