

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007811

FILED  
Apr 29, 2011  
Secretary of State

**Entity Name:** MEADOWS OF ESTERO CONDOMINIUM, INC.

**Current Principal Place of Business:**

C/O COMPASS GROUP  
3701 TAMiami TRAIL N, 3RD FLOOR  
NAPLES, FL 34103

**New Principal Place of Business:**

21516 BACCARAT LANE  
ESTERO, FL 33928

**Current Mailing Address:**

C/O COMPASS GROUP  
3701 TAMiami TRAIL N, 3RD FLOOR  
NAPLES, FL 34103

**New Mailing Address:**

C/O CASTLE GROUP  
P.O. BOX 559009  
FT. LAUDERDALE, FL 33355

**FEI Number:** 20-4704254

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BECKER & POLIAKOFF, PA  
999 VANDERBILT BEACH RD  
#501  
NAPLES, FL 34108 US

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

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:**

Title: PD  
Name: GILMAN, JAMES JR  
Address: 3530 LANSING LOOP #103  
City-St-Zip: ESTERO, FL 33928

Title: D  
Name: HAAS, DAVID  
Address: 9 CRYSTAL LAKE RD. SUITE 150  
City-St-Zip: LAKE IN THE HILLS, IL 60156

Title: SD  
Name: TOLL, ANITA  
Address: 21548 TAFT COURT #101  
City-St-Zip: ESTERO, FL 33928

Title: TD  
Name: SEIBERT, LOU  
Address: 3540 LANSING LOOP #201  
City-St-Zip: ESTERO, FL 33928

I hereby 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 all other like empowered.

SIGNATURE: ROBERT A DONNELLY

MGR

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date