2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003198

FILED Feb 23, 2009 Secretary of State

Entity Name: MEADOWLAKE PALM HARBOR CONDOMINIUM ASSOCIATION, INC.

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

2690 CORAL LANDINGS BLVD PALM HARBOR, FL 34684

Current Mailing Address: New Mailing Address:

2690 CORAL LANDINGS BLVD PALM HARBOR, FL 34684

FEI Number: 20-4642795 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:

MCRAE & STOLZ PALM HARBOR MANAGER, INC.

2690 CORAL LANDINGS BLVD

PALM HARBORQ, FL 34684 US

ROBERT TANKEL PA
1022 MAIN ST
SUITE D

DUNDEDIN, FL 34698 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: STEPHANIE TRETO 02/23/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VD () Delete
 Title:
 P (X) Change () Addition

 Name:
 MCRAE, W. ALAN
 Name:
 HOKE, TERRY

 Address:
 366 N MAIN ST STE 400
 Address:
 2464 INDIAN TRAIL WEST

 City-St-Zip:
 ALPHARETTA, GA 30004
 City-St-Zip:
 PALM HARBOR, FL 34683

Title: STD () Delete Title: VP (X) Change () Addition Name: SNYDER, PENNY Name: WILLIAMS, TERESA

Address: 366 N MAIN ST STE 400 Address: 4618 SYLVAN RAMBLE
City-St-Zip: ALPHARETTA, GA 30004 City-St-Zip: TAMPA, FL 33609

Title: VP () Delete Title: T (X) Change () Addition Name: LUBOTSKY, DAVID Name: LUBOTSKY, DAVID

Address: 2690 CORAL LANDINGS BLVD. #517 Address: 2690 CORAL LANDINGS BLVD. #517

City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: PALM HARBOR, FL 34684

Title: () Delete Title: S () Change (X) Addition Name: Name: MILLOVITSCH, JOANNE

Address: Address: 2690 CORAL LANDINGS BLVD #617

City-St-Zip: City-St-Zip: PALM HARBOR, FL 34684

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: STEPHANIE TRETO CAM 02/23/2009