

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10268

**FILED**  
**Mar 19, 2012**  
**Secretary of State**

**Entity Name:** TECHNOLOGY SQUARE OF MEADOWCREST PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6366 S CHEROKEE WAY  
HOMOSASSA, FL 34448 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 245  
HOMOSASSA, FL 34487 US

**New Mailing Address:**

FEI Number: 59-2574031

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANDERSON, ROBERTA G MGR  
6366 S CHEROKEE WAY  
HOMOSASSA, FL 34448 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: D  
Name: TAYLOR, MARINA C  
Address: PO BOX 2050  
City-St-Zip: LECANTO, FL 34460 US

Title: D  
Name: CAPPUCILLI, JOSEPH  
Address: PO BOX 2050  
City-St-Zip: LECANTO, FL 34460 US

Title: D  
Name: RIEGLER, MICHAEL  
Address: PO BOX 2050  
City-St-Zip: LECANTO, FL 34460 US

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: ROBERTA ANDERSON

MGR

03/19/2012

Electronic Signature of Signing Officer or Director

Date