

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14703

FILED  
Jan 07, 2010  
Secretary of State

**Entity Name:** MEADOWS OF COUNTRYWAY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

UNIVERSITY PROPERTIES INC  
7001 TEMPLE TERRACE HWY  
TEMPLE TERRACE, FL 33637 US

**New Principal Place of Business:**

**Current Mailing Address:**

UNIVERSITY PROPERTIES INC  
7001 TEMPLE TERRACE HWY  
TEMPLE TERRACE, FL 33637 US

**New Mailing Address:**

FEI Number: 59-2671038      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DUARK, ANTONIO III  
6221 LAND O'LAKES BLVD.  
LAND O LAKES, FL 34639 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: DP  
Name: JACOBS, CYNTHIA  
Address: 8610 THIMBLEBERRY LN  
City-St-Zip: TAMPA, FL 33635 US

Title: DST  
Name: ANDERSON, LYNN  
Address: 8607 BOYSENBERRY LN  
City-St-Zip: TAMPA, FL 33635 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: DAPHINE WILSON

LCAM

01/07/2010

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

\_\_\_\_\_  
Date