# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 02, 2005 8:00 am**
**Secretary of State**
05-02-2005 90566 009 ****61.25

DOCUMENT # N23240

1. Entity Name
MEADOW BROOK AT P.G.A. CONDOMINIUM ASSOCIATION, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 12300 ALT AIA<br>STE 110<br>PALM BEACH GARDENS, FL 33410 US | 223 CYPRESS POINT DRIVE<br>PALM BEACH GARDENS, FL 33418 US |

04122005 Chg-NP CR2E037 (10/03)

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| MEADOW BROOK @ PGA | SEACREST SERVICES |
| Suite, Apt. #, etc.<br>CYPRESS POINT DRIVE | Suite, Apt. #, etc.<br>SUITE 175<br>2400 CENTRE PARK WEST |
| City & State<br>PALM BEACH GARDENS | City & State<br>WEST PALM BEACH, FL |
| Zip<br>33418 Country<br>USA | Zip<br>33409 Country<br>USA |

4. FEI Number
65-0029733
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

BROOKS, HAROLD
223 CYPRESS POINT DRIVE
PALM BEACH GARDENS, FL 33418

**7. Name and Address of New Registered Agent**

Name STEPHEN YARUIS
Street Address (P.O. Box Number is Not Acceptable)
222 CYPRESS POINT DRIVE
City PALM BEACH GARDENS FL Zip Code 33418

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE 4/24/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is $61.25**
**Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

**Make check payable to Florida Department of State**

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VD<br>HOLMES, DANIEL T<br>21 N. HEPBURN AVENUE, #14<br>JUPITER, FL 33458 | ☒ Delete | President<br>Stephen Yaruis<br>222 Cypress Pt. Drive<br>Palm Beach Gardens, FL 33418 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>BROOKS, HAROLD O<br>223 CYPRESS POINT DRIVE<br>PALM BEACH GARDENS, FL 33418 | ☐ Delete | Director<br>same info | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>SAMONICH, NANCY SAMANICH<br>111 CYPRESS POINT DRIVE<br>PALM BEACH GARDENS, FL 33418 | ☐ Delete | Secretary/Treasurer<br>same info | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | Vice President<br>Kelly Tullin<br>114 Cypress Pt. Dr.<br>Palm Beach Gardens, FL 33418 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | ~~Treasurer~~ DIRECTOR<br>John "Ted" Lee<br>211 Cypress Pt. Dr.<br>Palm Beach Gardens, FL 33418 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | | ☐ Change ☐ Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Nancy C. Samonich Secretary/Treasurer 4/24/05 (561)443-8547
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

NANCY C. SAMANICH SECRETARY/TREASURER