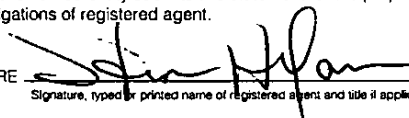
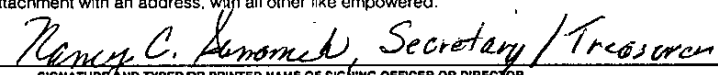


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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 12300 ALT AIA STE 110 PALM BEACH GARDENS, FL 33410 US			Mailing Address 223 CYPRESS POINT DRIVE PALM BEACH GARDENS, FL 33418 US		
2. Principal Place of Business MEADOW BROOK AT PGA		3. Mailing Address SEACREST SERVICES		 04122005 Chg-NP CR2E037 (10/03)	
Suite, Apt. #, etc. CYPRESS POINT DRIVE		Suite, Apt. #, etc. SUITE 175 2400 CENTRE PARK WEST			
City & State PALM BEACH GARDENS		City & State WEST PALM BEACH, FL			
Zip 33418		Zip 33409			
Country USA		Country USA		4. FEI Number 65-0029733	
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 Numbers Not Acceptable) 222 CYPRESS POINT DRIVE PALM BEACH GARDENS FL 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 HOLMES, DANIEL T 21 N. HEPBURN AVENUE, #14 JUPITER, FL 33458	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Stephen Yarus 222 Cypress Pt. Drive Palm Beach Gardens, FL 33418	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BROOKS, HAROLD O 223 CYPRESS POINT DRIVE PALM BEACH GARDENS, FL 33418	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director same info	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SAMONICH, NANCY SAMANICH 111 CYPRESS POINT DRIVE PALM BEACH GARDENS, FL 33418	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary/Treasurer same info	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Kelly Tullin 114 Cypress Pt. Dr. Palm Beach Gardens, FL 33418	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR John "Ted" Lee 211 Cypress Pt. Dr. Palm Beach Gardens, FL 33418	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	☐ 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:  DATE 4/24/05 (561) 493-8547 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
NANCY C. SAMANICH SECRETARY / TREASURER					