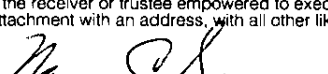


FILED
Aug 10, 2007 8:00 am
Secretary of State

08-10-2007 90047 042 ****70.00

2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N23240 1. Entity Name MEADOW BROOK AT P.G.A. CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business MEADOW BROOK ET PGA CYPRESS POINT DR PALM BEACH GARDENS, FL 33418 US		Mailing Address SEACREST SERVICES 2400 CENTRE PARK WEST WEST PALM BEACH, FL 33409 US	
2. Principal Place of Business - No P.O. Box # 300 Ave of The Champions		3. Mailing Address 300 Ave of The Champions	
Suite, Apt. #, etc. Suite 120		Suite, Apt. #, etc. Suite 120	
City & State Palm Beach Gardens, FL		City & State Palm Beach Gardens, FL	
Zip 33418		Zip 33418	
Country USA		Country USA	
4. FEI Number 65-0029733		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		08012007 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent YARVIS, STEPHEN 222 CYPRESS POINT DR PALM BEACH GARDENS, FL 33418		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$61.25 Due by September 14, 2007		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	P Director YARVIS, STEPHEN 222 CYPRESS PT DR PALM BEACH GARDENS, FL 33418 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Gary, Nagle 300 Ave. of the Champions, Ste. 120 Palm Beach Gardens, FL 33418 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DUNNE, WILLIAM 219 CYPRESS PT DR PALM BEACH GARDENS, FL 33418 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Samanich, Nancy 300 Ave. of the Champions, Ste. 120 Palm Beach Gardens, FL 33418 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Treasurer SAMANICH, NANCY 111 CYPRESS POINT DRIVE PALM BEACH GARDENS, FL 33418 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Goodman Clara B. 300 Ave. of the Champions, Ste. 120 Palm Beach Gardens, FL 33418 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FURLUTTE, JUOY 620 MASTERS WAY PALM BEACH GARDENS, FL 33418 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Yarvis, Stephen 300 Ave. of the Champions Suite 120 Palm Beach Gardens, FL 33418 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE, JOHN "TED" 211 CYPRESS PT DR PALM BEACH GARDENS, FL 33418 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 		8/7/07 (561) 625-8585	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	