

FILE NOW: FILING FEE IS \$61.25

FILED  
Mar 05 1998 8:00am  
Secretary of State

|  |   |   |
|--|---|---|
| NONPROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1998</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|--|---|---|

**DOCUMENT # N25154 (8)**

1. Corporation Name  
**MEADOWS PRESERVATION, INC.**

|  |  |
|--|--|
| Principal Place of Business<br><b>2555 PGA BLVD<br/>SUITE 209<br/>PALM BEACH GARDENS FL 33410<br/>US</b> | Mailing Address<br><b>2555 PGA BLVD<br/>SUITE 209<br/>PALM BEACH GARDENS FL 33410<br/>US</b> |
|--|--|

|   |  |
|---|--|
| 2. Principal Place of Business<br>21 Suite, Apt. #, etc.<br>22 City & State<br>23 Zip<br>24 Country | 2a. Mailing Address<br>26 Suite, Apt. #, etc.<br>27 City & State<br>28 Zip<br>29 Country |
|---|--|

9. Name and Address of Current Registered Agent

**WATT, JAMES L.  
1900 PHILLIPS POINT WEST  
777 SOUTH FLAGLER DR  
WEST PALM BEACH FL 33401-3198**

|  |   |   |
|--|---|---|
| 3. Date Incorporated or Qualified<br><b>03/02/1988</b>   | 4. FEI Number<br><b>65-0127808</b>  | Applied For<br><input type="checkbox"/> Not Applicable  |
| 5. Certificate of Status Desired<br><input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>   | 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> | 7. Is this nonprofit corporation a homeowners association?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |   |   |

10. Name and Address of New Registered Agent

|         |   |    |           |             |
|---------|---|----|-----------|-------------|
| 81 Name | 82 Street Address (P.O. Box Number is Not Acceptable) | 83 | 84 City   | 85 Zip Code |
|         |   |    | <b>FL</b> |             |

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS |   | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
|----------------------------|---|---|--|
| TITLE                      | VD <input checked="" type="checkbox"/> DELETE | 1.1 TITLE   | <b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition  |
| NAME                       | <b>BACHIOCHI, MARY</b>                        | 1.2 NAME  | <b>Bachiochi, Mary</b>   |
| STREET ADDRESS             | <b>2555 PGA BLVD., #112</b>                   | 1.3 STREET ADDRESS                                    | <b>2555 PGA Blvd #112</b>  |
| CITY-ST-ZIP                | <b>PALM BEACH GARDENS FL</b>                  | 1.4 CITY-ST-ZIP                                       | <b>Palm Beach Gardens, FL 33410</b>  |
| TITLE                      | SD <input type="checkbox"/> DELETE            | 2.1 TITLE   | <b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition  |
| NAME                       | <b>STEVENSON, TED</b>                         | 2.2 NAME  | <b>McNab, David</b>  |
| STREET ADDRESS             | <b>2555 PGA BLVD., #89</b>                    | 2.3 STREET ADDRESS                                    | <b>2555 PGA Blvd #180</b>  |
| CITY-ST-ZIP                | <b>PALM BEACH GARDENS FL</b>                  | 2.4 CITY-ST-ZIP                                       | <b>Palm Beach Gardens, FL 33410</b>  |
| TITLE                      | PD <input checked="" type="checkbox"/> DELETE | 3.1 TITLE   | <b>VD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | <b>TYRELL, THERESA</b>                        | 3.2 NAME  | <b>Tyrell, Theresa</b>   |
| STREET ADDRESS             | <b>2555 PGA BLVD #118</b>                     | 3.3 STREET ADDRESS                                    | <b>2555 PGA Blvd #118</b>  |
| CITY-ST-ZIP                | <b>PALM BEACH GARDENS FL</b>                  | 3.4 CITY-ST-ZIP                                       | <b>Palm Beach Gardens, FL 33410</b>  |
| TITLE                      | TD <input type="checkbox"/> DELETE            | 4.1 TITLE   | <b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition  |
| NAME                       | <b>HARRIS, BARBARA</b>                        | 4.2 NAME  | <b>Flynn, Gerald</b>   |
| STREET ADDRESS             | <b>2555 PGA BLVD #209</b>                     | 4.3 STREET ADDRESS                                    | <b>2555 PGA Blvd #43</b>   |
| CITY-ST-ZIP                | <b>PALM BCH GARDENS FL</b>                    | 4.4 CITY-ST-ZIP                                       | <b>Palm Beach Gardens, FL 33410</b>  |
| TITLE                      | D <input checked="" type="checkbox"/> DELETE  | 5.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                      |
| NAME                       | <b>HARDING, ALBERT</b>                        | 5.2 NAME  |  |
| STREET ADDRESS             | <b>2555 PGA BLVD #16</b>                      | 5.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                | <b>PALM BEACH GARDENS FL</b>                  | 5.4 CITY-ST-ZIP                                       |  |
| TITLE                      | D <input checked="" type="checkbox"/> DELETE  | 6.1 TITLE   | <b>PD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | <b>MCCANN, DICK</b>                           | 6.2 NAME  | <b>McCann, Richard</b>   |
| STREET ADDRESS             | <b>2555 PGA BLVD., #119</b>                   | 6.3 STREET ADDRESS                                    | <b>2555 PGA Blvd #119</b>  |
| CITY-ST-ZIP                | <b>PALM BCH GARDENS FL</b>                    | 6.4 CITY-ST-ZIP                                       | <b>Palm Beach Gardens, FL 33410</b>  |

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 3-19-98 FL 11624-1161

CR2E037 (10/97)