

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25680

FILED  
Jan 07, 2010  
Secretary of State

**Entity Name:** MEADOW LAKE HOMEOWNERS ASSOCIATION OF EDGEWATER, INC.

**Current Principal Place of Business:**

220 MEADOW LAKE DR.  
EDGEWATER, FL 32141

**New Principal Place of Business:**

**Current Mailing Address:**

220 MEADOW LAKE DR.  
EDGEWATER, FL 32141

**New Mailing Address:**

FEI Number: 59-3052047

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AVITELLO, VINCENT J  
220 MEADOW LAKE DR.  
EDGEWATER, FL 32141 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: TREA  
Name: AVITELLO, VINCENT J  
Address: 220 MEADOW LAKE DR.  
City-St-Zip: EDGEWATER, FL 32141

Title: DIR.  
Name: CALABRESE, NAOMI  
Address: 324 PINE BREEZE DR  
City-St-Zip: EDGEWATER, FL 32141

Title: DIR.  
Name: FAHEY, EDWARD  
Address: 197 CLOVERRIDGE CT  
City-St-Zip: EDGEWATER, FL 32141

Title: S  
Name: SHAW, MARGE  
Address: 214 MEADOW LAKE DR.  
City-St-Zip: EDGEWATER, FL 32141

Title: DIR  
Name: KAHUDA, PETER  
Address: 235 MEADOW LAKE DR  
City-St-Zip: EDGEWATER, FL 32141

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: NAOMI CALABRESE

DIR

01/07/2010

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

\_\_\_\_\_  
Date