

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26353

FILED
Feb 12, 2007
Secretary of State

Entity Name: MEADOWLAKE NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

2 MEADOWLAKE CIR S
LAKE PLACID, FL 338527077 US

New Principal Place of Business:

Current Mailing Address:

2 MEADOWLAKE CIR S
LAKE PLACID, FL 338527077 US

New Mailing Address:

FEI Number: 59-2947173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUZEY, ROBERT L
43 MEADOWLAKE CIR N
LAKE PLACID, FL 338527076 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: PD () Delete
Name: PUZEY, ROBERT L
Address: 43 MEADOW CIR N
City-St-Zip: LAKE PLACID, FL 338527076

Title: VD () Delete
Name: MOREO, ROY
Address: 46 MEADOWLAKE CIR N
City-St-Zip: LAKE PLACID, FL 338527077

Title: SD () Delete
Name: GOODYEAR, SALLY S
Address: 42 MEADOW LAKE CIR S
City-St-Zip: LAKE PLACID, FL 338527077

Title: TD () Delete
Name: THARP, VERA
Address: 52 MEADOWLAKE CIR S
City-St-Zip: LAKE PLACID, FL 338527076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: SARTORY, LARRY
Address: 14 MEADOWLAKE CIR N
City-St-Zip: LAKE PLACID, FL 338527076

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: DIAZ, SHARON
Address: 10 MEADOWLAKE CIR S
City-St-Zip: LAKE PLACID, FL 338527077

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT L. PUZEY

PRES

02/12/2007

Electronic Signature of Signing Officer or Director

_____ Date