

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90439 022 \*\*\*\*61.25

**DOCUMENT # N29543**

1. Entity Name  
**MEADOWS OF PUNTA GORDA CONDOMINIUM  
ASSOCIATION, INC.**



Principal Place of Business  
**449 ROYAL POINCIANA  
#122  
PUNTA GORDA, FL 33955**

Mailing Address  
**2421 SHREVE ST  
STE 115  
PUNTA GORDA, FL 33950**

400500-



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02152007 Chg-NP CR2E037 (12/06)

4. FEI Number  
**65-0011387**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BENNETT, DOROTHY M  
2421 SHREVE ST STE 115  
PUNTA GORDA, FL 33950**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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 May 1, 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 D  
NAME LANDCASTER, JOHN ☒ Delete  
STREET ADDRESS 2101 GULFVIE RD  
CITY-ST-ZIP PUNTA GORDA, FL 33950

TITLE PD  
NAME ANDERSON, DOROTHY M ☐ Change ☒ Addition  
STREET ADDRESS 632 BRENDSIE COURT  
CITY-ST-ZIP PUNTA GORDA, FL 33950

TITLE VD  
NAME ANTON, BILCIKLE ☐ Delete  
STREET ADDRESS 9030 BURNT STORE RD  
CITY-ST-ZIP PUNTA GORDA, FL 33950

TITLE D  
NAME ANDERSON, CRAIG E ☐ Change ☒ Addition  
STREET ADDRESS 632 BRENDSIE COURT  
CITY-ST-ZIP PUNTA GORDA, FL 33950

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*D Bennett RA/CAm*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/07  
Date

941-639-1142  
Daytime Phone #