

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32480

FILED  
Mar 04, 2009  
Secretary of State

**Entity Name:** THE MEADOW AT PARKER LAKES NEIGHBORHOOD HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2180 W. STATE ROAD 434  
SUITE 5000  
LONGWOOD, FL 327795044

**New Principal Place of Business:**

**Current Mailing Address:**

2180 W. STATE ROAD 434  
SUITE 5000  
LONGWOOD, FL 327795044

**New Mailing Address:**

**FEI Number:** 59-2953171

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HART, JAMES W JR  
SENTRY MANAGEMENT INC.  
2180 W SR 434 STE 5000  
LONGWOOD, FL 327795044 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: SD ( ) Delete  
Name: EVANS, SUSAN  
Address: 15121 CLOVERDALE DR  
City-St-Zip: FORT MYERS, FL 33919

Title: D ( ) Delete  
Name: JONES, ALAN  
Address: 15309 CRICKET LANE  
City-St-Zip: FORT MYERS, FL 33919

Title: PD ( ) Delete  
Name: NARGI, ARMANDO  
Address: 15270 CRICKET LANE  
City-St-Zip: FORT MYERS, FL 33919

Title: D ( ) Delete  
Name: GIBSON, BILLY  
Address: 15150 CLOVERDALE DR  
City-St-Zip: FORT MYERS, FL 33919

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPD (X) Change ( ) Addition  
Name: CRAMER, ARTHUR  
Address: 2504 HARBOR CT  
City-St-Zip: FORT MYERS, FL 33908

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

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

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

Title: SD ( ) Change (X) Addition  
Name: BAVETZ, JUDY  
Address: 15057 CLOVERDALE DR  
City-St-Zip: FORT MYERS, FL 33919

Title: TD ( ) Change (X) Addition  
Name: JOHNSON, JANET  
Address: 15229 CRICKET LN  
City-St-Zip: FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify 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: ARMANDO NARGI

PD

03/04/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date