2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

May 03, 2005 8:00 am Secretary of State DOCUMENT # N34270 1. Entity Name 05-03-2005 90098 028 ****61.25 FRESH MEADOWS HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address C/O STOKES MANAGEMENT C/O STOKES MANAGEMENT 3053 51ST STREET SARASOTA FL 34234 3053 51ST STREET SARASOTA FL 34234 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) Applied For City & State City & State 4. FEI Number 65-0174885 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STOKES, REBECCA Street Address (P.O. Box Number is Not Acceptable) 3035-51ST-SREET SARASOTA FL 34234 City Zip Code FI 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 it applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition ROBL, CANDACE 6021 62ND CTE STREET ADDRESS STREET ADDRESS PALMETTO FL 34221 CITY-ST-ZIP CITY-ST-ZIP DST TITLE ☐ Delete Change Addition Director, Vice-Pres. SIMMONS, LAURA NAME NAME 6203 62ND TERR E STREET ADDRESS STREET ADDRESS PALMETTO FL 34221 CITY-ST-ZIP CITY-ST-ZIP DVP Addition TITLE XX Delete TETEF Change Treasurer, Director LEVESQUE, ROBERT Smith, Tim 6006 62nd Ct. E. NAME 6206 62ND TERR E STREET ADDRESS STREET ADDRESS PALMETTO FL 34221 CITY-ST-ZiP CITY-ST-7IP Palmetto, FL 34221 TITLE TITLE ☐ Change Addition X Delete Director Martin, Tony PELLEGRINO, ANTHONY NAME NAME 6605 63RD AVE STREET ADDRESS STREET ADDRESS 6205 65th Ct. E. PALMETTO FL 34221 CITY-ST-ZIP CITY-ST-ZIP Palmetto, FL 34221 HILE ☐ Delete TITLE Change Addition Director NAME NAME Omilak, Phyllis 6106 62nd Terr. E. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Palmetto, FL 34221 TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 recorder 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 attachme ith an address, with all

SIGNATURE:

ndare ROBL-Pres.

FILED