2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36336

FILED Jan 16, 2009 Secretary of State

Entity Name: MEADOWBROOK LAKES VIEW CONDOMINIUM ASSOCIATION "C", INC.

Current Principal Place of Business:				New Principal Place of Business:			
180 SE 5TH DANIA, FL							
Current Mailing Address:			New Mail	New Mailing Address:			
180 SE 5TH DANIA, FL							
FEI Number:	59-2997200	FEI Number Applied For ()	FEI Number Not App	plicable ()	Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	d Address of	f New Registered Agent:		
PILON, SHI 190 SE 5TH #503 DANIA, FL The above I	33004 US	/ submits this statement for the pur	rpose of changing	its registered	d office or registered agent, or bo	th,	
in the State		'		J	<i>3</i> ,	,	
SIGNATUR		. 0. 1 (D . 1 14				_	
	Electro	onic Signature of Registered Agen			Date		
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	T (HELMS, GAE 170 SE 5TH / DANIA, FL 3	NE. #302	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	D (MALONELILL 170 SE 5TH / DANIA, FL 33	NVE. 3408	Title: Name: Address: City-St-Zip:	D MALONE, LII 170 SE 5TH . DANIA, FL 3	AVE. #408		
Title: Name: Address: City-St-Zip:	AT (DEVINE, LOU 170 S.E 5TH DANIA, FL 33	# 506	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	P RANELLI, VIN 190 SE 5TH A DANIA, FL 33	\VE	Title: Name: Address: City-St-Zip:	P RANELLI, VII 190 SE 5TH . DANIA, FL 3	AVE # 504		
Title: Name: Address: City-St-Zip:	S (PILON, SHIR 180 SE 5TH A DANIA, FL 33	NVE. #503	Title: Name: Address: City-St-Zip:	S PILON, SHIR 190 SE 5TH . DANIA, FL 3	AVE. #503		
Title: Name: Address: City-St-Zip:	VP (LAINEY, JOH 170 SE 5TH / DANIA, FL 33	NVE #401	Title: Name: Address: City-St-Zip:		()Change ()Addition		

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: J.GAETAN HELMS T 01/16/2009