

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 21, 2004
Secretary of State**

DOCUMENT# N41430

Entity Name: PARK PLACE AT MEADOW WOODS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2180 W SR 434 STE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 32779

Current Mailing Address:

2180 W SR 434 STE 5000
LONGWOOD, FL 32779

New Mailing Address:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 32779

FEI Number: 59-3108532 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
2180 W SR 434 STE 5000
LONGWOOD, FL 32779

Name and Address of New Registered Agent:

HART, JAMES W JR
2180 W SR 434
SUITE 5000
LONGWOOD, FL 32779 US

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: JAMES W HART JR 04/21/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: HORINE, WILLIAM
Address: 868 MONOPLY CT
City-St-Zip: ORLANDO, FL 32824

Title: PD () Delete
Name: ONEST, THEODORE
Address: 872 MONOPOLY COURT
City-St-Zip: ORLANDO, FL

Title: STD () Delete
Name: BASFORD, KATHLEEN
Address: 864 MONOPOLY COURT
City-St-Zip: ORLANDO, F

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: ONEST, TED
Address: 872 MONOPLY CT
City-St-Zip: ORLANDO, FL 32824

Title: STD (X) Change () Addition
Name: LINFORD, FIONA
Address: 880 MONOPOLY COURT
City-St-Zip: ORLANDO, FL 32824

Title: PD (X) Change () Addition
Name: BASFORD, KATHLEEN
Address: 864 MONOPOLY COURT
City-St-Zip: ORLANDO, F 32824

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KATHLEEN BASFORD PD 04/21/2004
Electronic Signature of Signing Officer or Director Date