FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N43626** **(3)**

1. Corporation Name

THE CHURCH AT MEADOW WOODS, INC.

Principal Place of Business	Mailing Address
P. O. BOX 590071 ORLANDO FL 32859-7071	P. O. BOX 590071 ORLANDO FL 32859-7071

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/15/1991
3a. Date of Last Report: 06/22/1994
4. FEI Number: 59-2977779 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24: 32859-0071 Country 25	Zip 29: 32859-0071 Country 30

9. Name and Address of Current Registered Agent

SIMS, DAVID A.
500 E. ALTAMONTE DRIVE
SUITE 200
ALTAMONTE SPRINGS FL 32701

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City **FL** 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	D	☑ Change ☐ Addition
NAME	GRAHAM, STEVEN EDWARD	1.2 NAME	ROBERT A. CASSATA	
STREET ADDRESS	14913 WHITE MAGNOLIA CT.	1.3 STREET ADDRESS	13629 NEWFIELD	
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	ORLANDO, FL 32837	
TITLE	PD	2.1 TITLE	D	☑ Change ☐ Addition
NAME	BEST, RICHARD V JR	2.2 NAME	HOLLY DE-GROOT-RUSSELL	
STREET ADDRESS	2 STIPPUP COURT	2.3 STREET ADDRESS	13143 DALLAS WDS. LANE	
CITY-ST-ZIP	KISSIMMEE FL	2.4 CITY-ST-ZIP	ORLANDO, FL 32824	
TITLE	VD	3.1 TITLE	PD	☑ Change ☐ Addition
NAME	NATER, ANGEL J JR	3.2 NAME		
STREET ADDRESS	1504 PURPLE VIOLET CT	3.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP		
TITLE	S	4.1 TITLE	T	☑ Change ☐ Addition
NAME	WATSON, ELIZABETH A	4.2 NAME	CONNIE CULBERTSON	
STREET ADDRESS	120 JERSEY WOODS CT	4.3 STREET ADDRESS	613 IOWA WDS CIR. E.	
CITY-ST-ZIP	ORLANDO FL	4.4 CITY-ST-ZIP	ORLANDO, FL 32824	
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	ALAWINE, HAROLD G	5.2 NAME		
STREET ADDRESS	12976 NEBRASKA WOODS CT	5.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Connie Culbertson 4-03-96 407-352-3102
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
CONNIE CULBERTSON

0004814