

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44664

FILED
Apr 10, 2012
Secretary of State

Entity Name: MEADOW OAKS MASTER ASSOCIATION, INC.

Current Principal Place of Business:

13100 FARWINDS ROAD
NEW PORT RICHEY
HUDSON, FL 34669 US

New Principal Place of Business:

13100 FARWINDS ROAD
HUDSON, FL 34669 US

Current Mailing Address:

13100 FARWINDS ROAD
NEW PORT RICHEY
HUDSON, FL 34669 US

New Mailing Address:

13100 FARWINDS ROAD
HUDSON, FL 34669 US

FEI Number: 59-2778082

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIRARDI, JAIME
9400 RIVER CROSSING BLVD
SUITE 104
NEW PORT RICHEY, FL 34655 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: PD
Name: GIRARDI, JAIME
Address: PO BOX 2108
City-St-Zip: ELFERS, FL 34680 US

Title: VPD
Name: MEST, CAROL
Address: 13100 FAIRWINDS ROAD
City-St-Zip: HUDSON, FL 34669 US

Title: SD
Name: CARPER, LINDA
Address: 13100 FAIRWINDS ROAD
City-St-Zip: HUDSON, FL 34669 US

Title: TD
Name: RYAN, SUE
Address: 13100 FAIRWINDS ROAD
City-St-Zip: HUDSON, FL 34667 US

Title: VPD
Name: MCMANUS, JAN
Address: 13100 FAIRWINDS ROAD
City-St-Zip: HUDSON, FL 34667 US

I hereby 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 all other like empowered.

SIGNATURE: JAIME P. GIRARDI

PD

04/10/2012

Electronic Signature of Signing Officer or Director

Date