SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Aug 12 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9300004780 (3)

MEADOWBROOK PARK OWNERS' ASSOCIATION, INC.

Principal Plac	e of Business	Malling Address		* 4007/201 019 10100 1111/ 0011/ 8011/ 0011/ 0011/ 0011/ 1011/ 1011/ 1011/ 1011/ 1011/ 1011/ 1011/ 1011/ 1011/
410 LEE BOULEVARD LEHIGH ACRES FL 33936 US		410 LEE BOULEVARD LEHIGH ACRES FL 33936		3. Date Incorporated or Qualified 10/18/1993
		US		4. FEI Number Applied Fo 65-0445485 Not Applied
2100	tace of Business	28. Mailing Address 26. P.O. Box	546	5. Certificate of Status Desired \$8.75 Additional Fee Required
Suite Apt.	# etc. 103	Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & Stat	h Acres. Fl	City & State 28 Chiah Ac	as, FL	7. Is this nonprofit corporation a homeowners association? Yes No
<u> </u>	72 25 U.S		cduntry 30 USA	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Registered Agent
PELZER, O	BERHARD			oly hard Volter address (P.O. 90x Number is Not Acceptable)
410 LEE B				7 deferson Avenue
Lehigh Fi	L 339 36		83	. 0
			84 City	ehigh Acros FL 85 Zip Code
11. Pursuant to	o the provisions of sections 617.0502	and 617 1508. Florida Statutes	the above-named corr	~~1111/17.1_/\/\/\/\/\\\\\\\\\\\\\\\\\\\\\\\\\\\\
er to soillo	gistered agent, or both, in the State of	of Florida. Such change was auti	horized by the corpora	coration sufficients this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
SIGNATURE.		Gerhara		7/13/98
<u> </u>	Signature, typed or printed name of registered ager	nt and title if applicable. (NOT	E: Registered Agent signature	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1
TITLE NAME	p d P elz er, Gerhard	DELETE	1.1 TITLE 1.2 NAME	Change Add
	817 JEFFERSON AVE		1.3 STREET ADDRESS	
CITY-ST-ZIP	LEHIGH FL 33936		1.4 CITY-ST-ZIP	
TITLE	D	DELETE	2.1 TITLE	☐ Change ☐ Add
NAME	SCHMIDT, MELANIE	X 322312	2.2 NAME	· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS	544 FOXCREEK DRIVE		2.3 STREET ADDRESS	
CITY-ST-ZIP	LEHIGH ACRES FL 33936		2.4 CITY-ST-ZIP	
TITLE	SVD	DELETE	3.1 TITLE	Change Add
NAME	SHIRK, KIMBERLY		3.2 NAME	
STREET ADDRESS	15755 CORAL VINE LANE		, 3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	FT. MYERS FL 33905		3.4 CITY-ST-ZIP	
NAME		DELETE	4.1 TILE 4.2 NAME	Change Add
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS	TAMMY SIMOT SOO 18th St SCU
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Which, FC 33971
TITLE		DELETE	6.1 TITLE	Change Add
NAME		C Deceie	5.2 NAME	□ Citation (□ Vote
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP	· .		5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Add
NAME		-	6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
			I	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	section 119.07(3)(I), Florida Statutes, I further certify that the information