

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004800

FILED  
Apr 30, 2006  
Secretary of State

Entity Name: MEADOWBROOK, UNIT 6, HOMEOWNERS' ASSOCIATION, INC.

## Current Principal Place of Business:

C/O KRM MANAGEMENT INC.  
431 WAVERLY ROAD  
TALLAHASSEE, FL 32312 US

## New Principal Place of Business:

## Current Mailing Address:

C/O KRM MANAGEMENT INC.  
431 WAVERLY ROAD  
TALLAHASSEE, FL 32312 US

## New Mailing Address:

FEI Number: 59-3174318      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ISAACS, DAN L  
C/O KRM MANAGEMENT INC.  
431 WAVERLY ROAD  
TALLAHASSEE, FL 32312 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: D ( ) Delete  
Name: REGISTER, MARY  
Address: 2420 BASSWOOD LANE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: DVP ( ) Delete  
Name: WILKINSON, JACKI  
Address: 867 VIOLET STREET  
City-St-Zip: TALLAHASSEE, FL 32308

Title: DP ( ) Delete  
Name: STUART, FAISON  
Address: 827 VIOLET  
City-St-Zip: TALLAHASSEE, FL 32308

Title: DS ( ) Delete  
Name: TAJDARI, ALI  
Address: 2430 BUTTON BUSH  
City-St-Zip: TALLAHASSEE, FL 32308

Title: DT ( ) Delete  
Name: COLLINS, TERRI  
Address: 2422 BUTTON BUSH  
City-St-Zip: TALLAHASSEE, FL 32308

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DP (X) Change ( ) Addition  
Name: WILKINSON, JACKI  
Address: 867 VIOLET STREET  
City-St-Zip: TALLAHASSEE, FL 32308

Title: DVP (X) Change ( ) Addition  
Name: STUART, FAISON  
Address: 827 VIOLET  
City-St-Zip: TALLAHASSEE, FL 32308

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JACKI WILKINSON

P

04/30/2006

Electronic Signature of Signing Officer or Director

Date