

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000002714

**FILED**  
**Apr 27, 2004**  
**Secretary of State****Entity Name:** THE MEADOWS AT BOGGY CREEK HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**882 JACKSON AVE  
WINTER PARK, FL 32789 US**New Principal Place of Business:****Current Mailing Address:**882 JACKSON AVE  
SUITE B  
WINTER PARK, FL 32789 US**New Mailing Address:****FEI Number:** 59-3274189**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**JORDAN, BRETT M  
882 JACKSON AVE  
WINTER PARK, FL 32789 US**Name and Address of New Registered Agent:**VANDER VLIET, AMANDA M  
882 JACKSON AVE  
WINTER PARK, FL 32789 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: AMANDA M. VANDER VLIET

04/27/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: MCGRATH, MATT  
Address: 9726 RED CLOVER AVENUE  
City-St-Zip: ORLANDO, FL 32824 US

Title: P ( ) Delete  
Name: NATALE, SADIE  
Address: 9510 LUPINE AVE  
City-St-Zip: ORLANDO, FL 32824

Title: T ( ) Delete  
Name: COULSON, MICHAEL  
Address: 9818 VIOLET DT  
City-St-Zip: ORLANDO, FL 32824

Title: D (X) Delete  
Name: HUCKE, ROGER  
Address: 1962 TEABERRY DT  
City-St-Zip: ORLANDO, FL 32824

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: OSBORN, STAN  
Address: 9519 LUPINE AVENUE  
City-St-Zip: ORLANDO, FL 32824

Title: STD (X) Change ( ) Addition  
Name: NATALE, SADIE  
Address: 9510 LUPINE AVE  
City-St-Zip: ORLANDO, FL 32824

Title: D (X) Change ( ) Addition  
Name: COULSON, MICHAEL  
Address: 9818 VIOLET DT  
City-St-Zip: ORLANDO, FL 32824

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 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: SADIE NATALE

STD

04/27/2004

Electronic Signature of Signing Officer or Director

Date