2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003472

FILED Jan 28, 2005 Secretary of State

Entity Name: MEADOW LANDS HOMEOWNERS ORGANIZATION, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 1453

ANTHONY, FL 326171453 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1453

ANTHONY, FL 326171453 US

FEI Number: 59-3340990 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CROTHERS, HOWARD E. FORD, LAUREEN
1283 NE 120TH STREET 12009 NE 8TH COURT
OCALA, FL 34479 US CALA, FL 34479 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: LAUREEN FORD 01/28/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: DT () Delete Title: D (X) Change () Addition

 Name:
 CROTHERS, HOWARD
 Name:
 DAILEY, HUGH

 Address:
 1283 NE 120TH STREET
 Address:
 12454 NE 14 AVE

 City-St-Zip:
 OCALA, FL 34479
 City-St-Zip:
 ANTHONY, FL 32617

Title: D () Delete Title: D (X) Change () Addition Name: BARRERAS, GILL Name: NORTON, HUBERT

 Address:
 99 NW 117TH STREET
 Address:
 12091 NE 10 TERR

 City-St-Zip:
 OCALA, FL 34475
 City-St-Zip:
 OCALA, FL 34479

Title: D () Delete Title: D (X) Change () Addition Name: HAMANN, KEN Name: HAMANN, KEN

 Address:
 865 NE 122ND ST
 Address:
 865 NE 122 ST

 City-St-Zip:
 OCALA, FL 34479
 City-St-Zip:
 OCALA, FL 34479

Title: DS () Delete Title: DT (X) Change () Addition

 Name:
 CROTHERS, ANNA
 Name:
 ROCCHI, GERALD

 Address:
 1283 NE 120TH ST
 Address:
 1290 NE 120 ST

 City-St-Zip:
 OCALA, FL 34479
 City-St-Zip:
 OCALA, FL 34479

Title: DVP () Delete Title: DVP (X) Change () Addition

 Name:
 HENNING, WM. CLARK
 Name:
 HENNING, WM. CLARK

 Address:
 12049 NE 8TH CT.
 Address:
 12049 NE 8 CT

City-St-Zip: OCALA, FL 344791046 City-St-Zip: OCALA, FL 344791046

Title: DP () Delete Title: DP (X) Change () Addition

 Name:
 FORD, LAUREEN
 Name:
 FORD, LAUREEN

 Address:
 12009 NE 8TH COURT
 Address:
 12009 NE 8 CT

 City-St-Zip:
 OCALA, FL
 City-St-Zip:
 OCALA, FL

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: LAUREEN FORD PRES 01/28/2005

Electronic Signature of Signing Officer or Director

Date