

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005626

FILED  
Mar 18, 2008  
Secretary of State

**Entity Name:** CASA DE MEADOWS PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

7140 SAN CASA DR.  
ENGLEWOOD, FL 34224 US

**New Principal Place of Business:**

**Current Mailing Address:**

7140 SAN CASA DR.  
ENGLEWOOD, FL 34224 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

ZIMMERMAN, ROBERT  
7100 SAN CASA DR.  
ENGLEWOOD, FL 342248807 US

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

SCHLEY, CHARLES A  
8130 CASA DE MEADOWS DRIVE  
ENGLEWOOD, FL 342248807 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: CHARLES A SCHLEY

03/18/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: BEERS, LARRY  
Address: 8050 CASA DE MEADOWS DRIVE  
City-St-Zip: ENGLEWOOD, FL 34224

Title: SD ( ) Delete  
Name: CAPES, DONALD L  
Address: 7140 SAN CAS DRIVE  
City-St-Zip: ENGLEWOOD, FL 34224

Title: PD ( ) Delete  
Name: ROWE, JAMES  
Address: 8030 CASA DE MEADOWS DR  
City-St-Zip: ENGLEWOOD, FL 34224

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

Title: TD (X) Change ( ) Addition  
Name: BEERS, LARRY  
Address: 8050 CASA DE MEADOWS DR  
City-St-Zip: ENGLEWOOD, FL 34224

Title: SD (X) Change ( ) Addition  
Name: ZOELLER, SONIA R  
Address: 8160 CASA DE MEADOWS DR  
City-St-Zip: ENGLEWOOD, FL 34224

Title: PD (X) Change ( ) Addition  
Name: CAPES, DONALD  
Address: 7140 SAN CASA DR  
City-St-Zip: ENGLEWOOD, FL 34224

I hereby certify that the information supplied with this filing does not qualify 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: SONIA R ZOELLER

SD

03/18/2008

Electronic Signature of Signing Officer or Director

Date