

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2001 8:00 am
Secretary of State

02-27-2001 90301 026 ****61.25

DOCUMENT # N97000001707

1. Entity Name

GREEN MEADOWS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

5620 SW 164 TERR
 FT LAUDERDALE FL 33331

5620 SW 164 TERR
 FT LAUDERDALE FL 33331

2. Principal Place of Business

5520 SW 163 AVE

3. Mailing Address

5520 SW 163 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Southwest Ranches, FL

City & State

Southwest Ranches, FL

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

33331

Country

USA

Zip

33331

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FINK, MECCA
 5620 SW 164 TERR
 FT LAUDERDALE FL 33331

Name **Mary E. Squires**

Street Address (P.O. Box Number is Not Acceptable)

5520 SW 163 AVE

City

Southwest Ranches, FL

FL

Zip Code

33331

8. 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 MARY E. SQUIRES

Signature/typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/15/01

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete
 NAME **FINK, MECCA**
 STREET ADDRESS **5620 SW 164 TERR**
 CITY-ST-ZIP **FT LAUDERDALE FL 33331**

TITLE **D** ☐ Change ☒ Addition
 NAME **Mary E. Squires**
 STREET ADDRESS **5520 SW 163 AVE, FL 33331**
 CITY-ST-ZIP **Southwest Ranches**

TITLE **D** ☐ Delete
 NAME **PUSHKAR, JAN**
 STREET ADDRESS **5210 SW 172 AVE**
 CITY-ST-ZIP **FT LAUDERDALE FL 33331**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☒ Delete
 NAME **HAGAN-STEVENS, MANON**
 STREET ADDRESS **4721 SW 164 TERR**
 CITY-ST-ZIP **FT LAUDERDALE FL 33331**

TITLE **D** ☐ Change ☒ Addition
 NAME **Michael Fisikelli**
 STREET ADDRESS **16601 SW 69 ST**
 CITY-ST-ZIP **Southwest Ranches, FL 33331**

TITLE **D** ☒ Delete
 NAME **HUTCHINSON, BRENDA**
 STREET ADDRESS **5220 SW 164 TERR**
 CITY-ST-ZIP **FT LAUDERDALE FL 33331**

TITLE **D** ☐ Change ☒ Addition
 NAME **Joan Boyd**
 STREET ADDRESS **5205 SW 163 Ave**
 CITY-ST-ZIP **Southwest Ranches, FL 33331**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other title empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MARY E. SQUIRES 2/15/01 305-558-5051

CR2E037 (10/00)