2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007
Secretary of State

DOCUMENT# N99000000163

Entity Name: MEADOW WALK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 51533
SARASOTA, FL 34232

New Principal Place of Business:

MEADOW BREEZE LANE AND PALMER BLVD.
SARASOTA, FL 34240

Current Mailing Address:

P.O. BOX 51533
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 65-0906666 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEWART, JOSEPH A
7354 DEER CROSSING CT.
SARASOTA, FL 34240 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:	PD	( ) Delete
Name:	STEWART, JOSEPH A	
Address:	7354 DEER CROSSING COURT	
City-St-Zip:	SARASOTA, FL 34240	
Title:	STD	( ) Delete
Name:	DANE, ELIZABETH R	
Address:	7389 DEER CROSSING CT.	
City-St-Zip:	SARASOTA, FL 34240	
Title:	VPD	( ) Delete
Name:	DEL SANTO, ANDREA B	
Address:	7309 DEER CROSSING COURT	
City-St-Zip:	SARASOTA, FL 34240	
Title:	D	( ) Delete
Name:	MARTIN, WILLIAM E	
Address:	7334 DEER CROSSING CT.	
City-St-Zip:	SARASOTA, FL 34240	
Title:	D	( ) Delete
Name:	TREHARNE, DIANE S	
Address:	1010 MEADOW BREEZE LANE	
City-St-Zip:	SARASOTA, FL 34240	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VPD	(X) Change ( ) Addition
Name:	TREHARNE, DIANE S	
Address:	1010 MEADOW BREEZE LANE	
City-St-Zip:	SARASOTA, FL 34240	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	ALLEN, CHARLES	
Address:	1005 MEADOW BREEZE LANE	
City-St-Zip:	SARASOTA, FL 34240	

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: ELIZABETH R. DANE STD 01/29/2007

Electronic Signature of Signing Officer or Director — Date