

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000163

FILED  
Jan 16, 2009  
Secretary of State

**Entity Name:** MEADOW WALK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

MEADOW BREEZE LANE AND PALMER BLVD.  
SARASOTA, FL 34240

**New Principal Place of Business:**

**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:**

WALSH, RAYMOND G  
1033 MEADOW BREEZE LANE  
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: WALSH, RAYMOND G PRESIDE  
Address: 1033 MEADOW BREEZE LANE  
City-St-Zip: SARASOTA, FL 34240

Title: SD ( ) Delete  
Name: FENIX, DOLLY B SEC  
Address: 7302 DEER CROSSING CT.  
City-St-Zip: SARASOTA, FL 34240

Title: VPD ( ) Delete  
Name: STEWART, JOSEPH E VP  
Address: 7354 DEER CROSSING COURT  
City-St-Zip: SARASOTA, FL 34240

Title: TD ( ) Delete  
Name: ALLEN, CHARLES TREAS  
Address: 1005 MEADOW BREEZE LANE  
City-St-Zip: SARASOTA, FL 34240

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: BICKEL, SHANA TREAS  
Address: 7398 DEER CROSSING COURT  
City-St-Zip: SARASOTA, FL 34240

Title: D ( ) Change (X) Addition  
Name: DUNAY, JANET DIRECTO  
Address: 7301 DEER CROSSING COURT  
City-St-Zip: SARASOTA, FL 34240

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: RAYMOND G. WALSH

PRES

01/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date