


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2007 08:00 AM
Secretary of State

DOCUMENT # N99000003580 1. Entity Name MEADOW LAKE AND DAM ASSOCIATION, INC.	
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Principal Place of Business 4815 MEADOW LAKE DRIVE CRESTVIEW, FL 32539	Mailing Address 4815 MEADOW LAKE DRIVE CRESTVIEW, FL 32539
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DO NOT WRITE IN THIS SPACE



01262007 No Chg-NP CR2ED37 (A/06)

4. FEI Number 59-3582791	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BURKART, JOSEPH W
4815 MEADOW LAKE DRIVE
CRESTVIEW, FL 32539

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when consenting) DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COB LINGERFELTER, CHARLES 748 ST. JOHN COVE NICEVILLE, FL 32578
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COFFIELD, PAMELA 4693 MEADOW LAKE DR CRESTVIEW, FL 325396376
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BURKART, JOSEPH 4815 MEADOW LAKE DRIVE CRESTVIEW, FL 325396376
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOD EDWARDS, RUFUS 4665 MEADOW LAKE DR CRESTVIEW, FL 325396376
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/01/07-80030-010 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 filers empowered.

SIGNATURE:  Date: 2/15/2007 Daytime Phone #: 850-682-1112