

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 08, 2005 8:00 am**  
**Secretary of State**

03-08-2005 90175 022 \*\*\*158.75

**DOCUMENT # P94000012874**

1. Entity Name  
MEADOWBROOK PARK ASSOCIATES, INC.



Principal Place of Business *Hidden Tree Lane* Mailing Address  
3625 MEADOWBROOK DR. 1266 FIRST STREET SUITE 8  
FT. MYERS, FL 33901 US SARASOTA, FL 34236

**40028579**



01112005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
36-3953232

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

KISTLER, RICHARD  
1266 FIRST STREET  
SARASOTA, FL 34236

**DO NOT WRITE  
IN THIS SPACE**

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 reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	KISTLER, RICHARD L
STREET ADDRESS	1266 FIRST ST., SUITE 8
CITY-ST-ZIP	SARASOTA, FL
TITLE	D
NAME	ROSNER, JAMES C
STREET ADDRESS	45 PROGRESS PARKWAY
CITY-ST-ZIP	MARYLAND HGTS, MO
TITLE	D
NAME	SAENGER, LEO C JR.
STREET ADDRESS	12412 POWERS CT DR. #150
CITY-ST-ZIP	SAINT LOUIS, MO 63141
TITLE	S
NAME	REITER, MARY F
STREET ADDRESS	1266 FIRST ST SUITE 8
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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 607, 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 like empowered.

**SIGNATURE:** *James C Rosner*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*3/2/05* *941/365-6194*  
Date Daytime Phone #