

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 17, 2007 8:00 am**  
**Secretary of State**

04-17-2007 90245 043 \*\*\*158.75

DOCUMENT # P94000012874

1. Entity Name

MEADOWBROOK PARK ASSOCIATES, INC.



Principal Place of Business

Mailing Address

3625 MEADOWBROOK DR.  
FT. MYERS FL 33901  
US

1266 FIRST STREET SUITE 8  
SARASOTA FL 34236



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1266 1ST CLARK RD

City & State

SARASOTA FL

Zip

Country

34236-3227

Country

USA

1st MOORE

CR2E034 (10/06)

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

7. Name and Address of New Registered Agent

KISTLER, RICHARD  
1266 FIRST STREET  
SARASOTA FL 34236

Name RICHARD L. KISTLER

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

1266 1ST CLARK ROAD

City SARASOTA

FL Zip Code 34236-3227

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME KISTLER, RICHARD L  
STREET ADDRESS 1266 FIRST ST., SUITE 8  
CITY - ST - ZIP SARASOTA FL ☐ Delete

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

TITLE D  
NAME ROSNER, JAMES C  
STREET ADDRESS 45 PROGRESS PARKWAY  
CITY - ST - ZIP MARYLAND HGTS MO ☐ Delete

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

TITLE D  
NAME SAENGER, LEO C JR.  
STREET ADDRESS 12412 POWERS CT DR. #150  
CITY - ST - ZIP SAINT LOUIS MO 63141 ☐ Delete

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

TITLE S  
NAME REITER, MARY F  
STREET ADDRESS 1266 FIRST ST SUITE 8  
CITY - ST - ZIP SARASOTA FL 34236 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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: *Richard L. Kistler* Pres

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-6-07

Date

941 921 0888

Daytime Phone #