PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000008221

1. Corporation Name

MEADOW BROOK HEIGHTS, INC.

Principal Place of Business											
2605-C	KURT	STREET									

Mailing Address

2605-C KURT STREET

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90174 024 ***150.00



EUSTIS FL 32720-6234		EU3113 FE 32720-0234			DO NOT WRI	DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed				
ı					01/26/1995				
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number		7	Applied For	
21		26			59-3293026			Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75	Additional	
22		27			5, Certifcate of Status Desired		Fee F	Required	
City & Stat	e	City & State			6. Election Campaign Financing	П	\$5.0	May Be	
23		28			Trust Fund Contribution		Adde	to Fees	
Zip	Country	Zip	Country		8. This corporation owes the curr	ent year Ir	ntangible	vv	
24	25	29 3	o]		Personal Property Tax.		Yes	X-XN0	
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New	Registered	Agent		
			81	Name				i	
	HAM, GEORGE G		82	Street A	ddress (P.O. Box Number is Not Accept	able)			
2605-C KURT STREET			02	Street Address (F.O. Box Number is Not Acceptable)					
EUS'	TIS FL 3272 6-6234		83						
l							les l'Si	Codo	
l			84	City		FI	85 Zij	Code	
11 Dureuant	to the provisions of Sections 607 05	502 and 607 1508 Florida Statutes	the abov	e-named o	corporation submits this statement for the	purpose 0	f changing i	ts registered	
office or r	egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such change was auti	horized by	the corpo	ration's board of directors. I hereby acce	pt the appo	ointment as	registered	
SIGNATURE									
	Signature, typed or printed name of registered as	· · · · · · · · · · · · · · · · · · ·	<u> </u>	t signature re	quired when reinstating) ADDITIONS/CHANGES TO OF	DATE A	ND DIRECT	TORS IN 12	
12.		AND DIRECTORS DELETE	13.	— т		TICENS A	Change		
TITLE	D	□ pere₁c			Р		ondrig	A-M/Nooman	
NAME	GRAHAM, GEORGE G		1.2 NAME	1					
STREET ADDRESS	2605-C KURT STREET		1.3 STREE	ADDRESS					
CITY-ST-ZIP	EUSTIS FL 32726-6234		1 4 CITY-S	T-ZIP					
TITLE		☐ DELETE	2.1 TITLE				Change	e ☐ Addition	
NAME			2.2 NAME					ļ	
STREET ADDRESS			2.3 STREE	ADDRESS					
CITY-ST-ZIP			2.4 CITY-5	T-ZIP					
TITLE		☐ DELETE	3.1 TITLE	1			Change	Addition	
NAME			3,2 NAME						
STREET ADDRESS			3.3 STREE	T ADDRESS					
CITY-ST-ZIP			3,4. CITY-5	T-ZIP					
TITLE		☐ DELETE	4,1 TITLE				Change	e 🔲 Addition	
NAME			4. 2 NAME	1					
STREET ADDRESS			4,3 STREE	T ADDRESS					
CITY-ST-ZIP			4,4 CITY- S						
TITLE		☐ DELETE	5.1 TITLE				☐ Change	a 🔲 Addition	
NAME			5.2 NAME						
			5,3 STREE	TADDRESS					
STREET ADDRESS			5.4 CITY-S						
CITY-ST-ZIP		☐ DELETE	6.1 TITLE				Chang	e	
		C DECELE	6.2 NAME	ŀ					
NAME				ADDRESS				į	
STREET ADDRESS									
CITY-ST-ZIP			6.4 CITY-S	I-ZIP					

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE

Date

Date

Daytime Phone #