

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000018665

FILED
May 04, 2006
Secretary of State

Entity Name: MEADOW VIEW ESTATES, INC.

Current Principal Place of Business:

505 ELSBERRY ROAD
APOLLO BCH, FL 33572 US

New Principal Place of Business:

Current Mailing Address:

505 ELSBERRY ROAD
APOLLO BCH, FL 33572 US

New Mailing Address:

FEI Number: 59-3443815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHMIDT, PETER H
400 SOUTH DIXIE HIGHWAY
SUITE 420
BOCA RATON, FL 33432 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: BROOKS, GARY D
Address: 560 ELSBERRY RD
City-St-Zip: APOLLO BEACH, FL 33572

Title: P () Delete
Name: BROOKS, OLIVER D
Address: 505 ELSBERRY RD.
City-St-Zip: APOLLO BEACH, FL 33572

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OLIVER D. BROOKS

PRES

05/04/2006

Electronic Signature of Signing Officer or Director

Date