2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2006
Secretary of State

DOCUMENT# P98000057139

Entity Name: MEADOWS PRESERVATION, INC.

Current Principal Place of Business:

2555 PGA BOULEVARD
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

2555 PGA BOULEVARD LOT 309
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 65-0860249 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIN-LENN, NATALIE
2300 PALMBEACH LAKESBLVD STE 308
WEST PALM BEACH, FL 33409 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GATKE, BOB
Address: 255 PGA BLVD #455
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D ( ) Delete
Name: STEVENSON, TED
Address: 2555 PGA BOULEVARD #89
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP ( ) Delete
Name: FLYNN, JACK
Address: 2555 PGA BLVD #185
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D ( ) Delete
Name: DELACEY, LIONEL
Address: 2555 PGA BLVD
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: ST ( ) Delete
Name: RICE, ELLAN
Address: 2555 PGA BLVD #309
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ELLAN RICE ST 03/04/2006

Electronic Signature of Signing Officer or Director Date