

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90114 026 ***150.00

DOCUMENT # P98000057139

1. Entity Name
MEADOWS PRESERVATION, INC.



Principal Place of Business
**2555 PGA BOULEVARD
PALM BEACH GARDENS FL 33410**

Mailing Address
**2555 PGA BOULEVARD
PALM BEACH GARDENS FL 33410**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0860249**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fees Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent

Name **Natalie Chin-Lenn, ESQUIRE**
Street Address (P.O. Box Number is Not Acceptable)
2300 Palm Beach Lakes Blvd, Suite 308
City **West Palm Beach, FL** Zip Code **33409**

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

Natalie Chin-Lenn, Attorney for Association 1/16/03

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, 2003 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

TITLE **P** ☒ Delete
NAME **BACHIOCHI, MARY**
STREET ADDRESS **2555 PGA BLVD #112**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE **V** ☐ Delete
NAME **GATCKE, BOB**
STREET ADDRESS **2555 PGA BLVD #455**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE **D** ☐ Delete
NAME **STEVENSON, TED**
STREET ADDRESS **2555 PGA BOULEVARD #89**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE **S** ☒ Delete
NAME **FLYNN, GERALD**
STREET ADDRESS **2555 PGA BLVD**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE **D** ☐ Delete
NAME **DELACEY, LIONEL**
STREET ADDRESS **2555 PGA BLVD**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE **D** ☒ Delete
NAME **SHALENBAELL, DOROTHY**
STREET ADDRESS **2555 PGA BLVD #160**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
NAME **Bob Gatche, Bob**
STREET ADDRESS **2555 PGA Blvd #455**
CITY-ST-ZIP **Palm Beach Gardens FL 33410**

TITLE **VP** ☐ Change ☒ Addition
NAME **Jack Flynn**
STREET ADDRESS **2555 PGA Blvd #185**
CITY-ST-ZIP **Palm Beach Gardens FL 33410**

TITLE **S/T** ☐ Change ☒ Addition
NAME **Ellan Rice**
STREET ADDRESS **2555 PGA Blvd #309**
CITY-ST-ZIP **Palm Beach Gardens FL 33410**

TITLE **D** ☐ Change ☒ Addition
NAME **Dennis Hall**
STREET ADDRESS **2555 PGA Blvd #316**
CITY-ST-ZIP **Palm Beach Gardens FL 33410**

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

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

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:

ELLAN RICE **REQUIRELLAN RICE/SECRETARY-TREASURER** 1/8/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date (561) 799-4017

CR2E034 (10/02)