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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000105815 1. Corpora ion Name

MEADOWWOODS, INC.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90084 037 ***150.00



| Principal Place of Business Mailing Address | | | | | | | 1 188 | | | | |
|--|---------------------|---------------------------------------|--|--|---|--------------|--|-----------------------|-------------------|----------------|------------|
| 1311 N. CHUF:C | H AVE. | 1311 N. CHURCH AVE. | 1311 N. CHURCH AVE. | | | - | | | | | |
| TAMPA FL 3330 |)7 | TAMPA FL 33607 | | | | - 1 | | DO NOT WE | RITE IN TH | S SPACE | |
| | | | | | | <u> </u> | Date In | corporated or Qualife | | | - |
| | | | | | | () | 12/18/ | • | • | | |
| 2 Principal C | Place of Business | 2a. Mailing Address | | | | | I. FEI Nu | | | Apr | ied For |
| 1 ' | lace of basiness | 26 | ¬ | | | | 50- | 356 9429 | l | | Applicable |
| Suite, Apt | # etc | Suite, Apt. #, etc. | | | | | | | | \$8.75 A | |
| 22 27 | | | , •••• | | | ! | i. Certifca | te of Status Desired | | Fee Rec | |
| City & S a | | City & State | <u> </u> | | | | 6. Election Campaign Financing | | | \$5.00 May Be | |
| 23 | | 28 | | | | [] | | and Contribution | ' \sqcup | Added to | |
| Zip | Country Zip | | | Country | | | 8. This corporation owes the current year Intangible | | | | |
| 24 | | | 30 | 1 | | | Personal Property Tax. Yes []No | | | | |
| | | Current Registered Agent | | | | 1 |). Name | and Address of New | Registere | d Agent | |
| | | | | 81 | Name | | | | | | |
| | er, richard m | | | 82 | Street | Address | P O Box | Number is Not Accer | ntable) | | |
| 1311 | N. CHURCH AVE. | | | 02 | Suber | A031033 | ddress (P.O. Box Number is Not Acceptable) | | | | |
| TAM | PA FL 33607 | | | 83 | | | | | - | | |
| | | | | | 0 | | | | | , 85 Zip C | vda |
| | | | | 84 | City | | | | F | L 85 Zip C | A A C |
| SIGNATURE | • | e obligations of, Section 607.0505, I | OTI : Registered | | | required whe | | | DATE | | |
| 12. | OFFICE | ERS ANE DIRECTORS | 13. | | | | ADDITIC | NS/CHANGES TO C | FFICERS | - | |
| TITLE | D | ☐ DELETE | 1.1 Tr | TLE | | 13,1D | | | | Change | ☐ Addition |
| NAME | HABER, RICHARD M | | 1.2 NA | ME | | | | | | , | |
| STREET ADDRESS | 1311 N. CHURCH AVE. | | 1.3 \$7 | REET | ADDRESS | 1 | | | | | |
| CITY-ST-ZIP | TAMPA FL 33607 | | 1.4 CI | TY-\$1 | -ZIP | Ļ <u> </u> | | | | | |
| TITLE | | ☐ DELETE | 2.1 TI | TLE | | | ,VP, S, T | | | Change | Addition |
| NAME | | | 2.2 N/ | AME | | ANDR | الم لما | LYNN WECH AVE | | | |
| STREET ADDRESS | s | | 2.3 \$1 | REET | ADORESS | 11911 | N. C | TORCH MAC | | | |
| CITY-ST-ZIP | | | 2.4 C | ΠY-\$ | T-ZIP | JAM | <u> </u> | L 33607 | | | |
| TITLE | | ☐ DELETE | 3.1 71 | TLE | | | | | | Change | Addition |
| NAME | | | 3.2 N | WE | | | | | | | |
| STREET ADDRESS | s | | 2207 | | ADDRESS | :] | | | | | |
| CITY-ST-ZIP | 1 | | 333 | IKEE | ADDITEGG | | | | | | |
| TTLE | | | 3.4. C | ITY-S | | ↓ | | | | | Addition |
| NAME | | ☐ DELETE | 3.4. C | ITY-S TLE | | <u> </u> | | | | Change | Addition |
| STREET ADDRESS | | ☐ DELETE | 3,4, C 4 1 TI 4, 2 N | ity-s tle iame | T- ZIP | | | | | Change | Addition |
| STREET ADDRESS | 5 | ☐ DELETE | 3.4. C 4.1 Ti 4.2 N 4.3 S1 | ITY-S TLE IAME IREET | T-ZIP ADDRESS | | | | | ☐ Change | Addition |
| CITY-ST-ZIP | s | | 3.4. C 4.1 Ti 4.2 N 4.3 Si 4.4 Ci | ITY-S TLE IAME IREET TY-ST | T-ZIP ADDRESS | | | | | | |
| | s | ☐ DELETE | 3.4. C 4.1 TI 4.2 N 4.3 S1 4.4 CI | ITY-S TLE IAME IREET TY-ST TLE | T-ZIP ADDRESS | | | | | ☐ Change | ☐ Addition |
| CITY-ST-ZIP | s | | 3.4. C 4.1 TI 4.2 N 4.3 S1 4.4 CI 5.1 TI 5.2 N | ITY-S TLE IAME IREET TY-ST TLE AME | T-ZIP ADDRESS -ZIP | | | | | | |
| CITY-ST-ZIP | | | 34. C 41 TI 4. 2 N 4.3 S1 4.4 CI 5.1 TI 5.2 N/ 5.3 S1 | ITY-S TLE IREET TY-ST TLE AME | ADDRESS - ZIP - ADDRESS | | | | | | |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ DELETE | 34. C 41 TI 4. 2 N 4.3 S1 4.4 CI 5.1 TI 5.2 N 5.3 S1 5.4 CI | ITY-S TLE IREET TY-ST TLE AME TREET | ADDRESS - ZIP - ADDRESS | | | | | ☐ Change | ☐ Addition |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS | | | 3.4. C 4.1 TI 4.2 N 4.3 SI 4.4 CI 5.1 TI 5.2 N/ 5.3 SI 5.4 CI 6.1 TI | ITY-S TLE IREET TY-ST TLE AME TREET TY-ST TLE | ADDRESS - ZIP - ADDRESS | | | | | | |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | s | ☐ DELETE | 3.4. C 4 1 TT 4. 2 N 4.3 ST 4.4 CI 5.1 TT 5.2 N/ 5.3 ST 5.4 CI 6.1 TT 6.2 N/ | ITY-S TLE AME TREET TY-ST TLE TREET TY-ST TLE TREET TY-ST TLE | ADDRESS - ZIP ADDRESS - ZIP | | | | | ☐ Change | ☐ Addition |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | s | ☐ DELETE | 3.4. C 4 1 TT 4. 2 N 4.3 S1 4.4 CI 5.1 TT 5.2 N/ 5.3 S1 5.4 CI 6.1 TT 6.2 N/ 6.3 S1 | ITY-S TLE AME TREET TY-ST TLE TREET TY-ST TLE TREET TY-ST TLE | ADDRESS - ZIP - ADDRESS - ZIP - ADDRESS - ADDRESS | | | | | ☐ Change | ☐ Addition |

6.4 CITY-ST-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 cartify 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 trusted 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 attach nept with an address, with a light of the corporation of the corporation of the receiver of trusted empowered.

SIGNATURE: