## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # S61078

(9)

MEADOW DALE MANOR INC.

Principal Place of Business	Mailing A

**FILED** Jun 05 1997 8:00am Secretary of State



Principal Place of Business Mailing Address			r concenso les merse vintri navir conde entre dente dente dente pedet dedet dedet dedet			
1507 MEADOW DALE DRIVE CLEARWATER FL 34842		1507 MEADOW DALE DRIVE				
VLCANWATER	FL 09092	CLEARWATER FL 34624-	2304			
					3. Date Incorporated or Qualific	ed 3a. Date of Last Report
					06/17/1991	04/16/1996
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 26			26		59-3108053	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		J. Solumono di Statos Bosillos	Fee Required	
City & State		City & State		6. Election Campaign Financing	, ,,,,	
<b>23</b> Zip	Zip Country Zip Country		NA .	Trust Fund Contribution	Added to Fees	
24	25	Zip 29	Cour	ııry		for intengible tax under s. 199.032,  Yes No
44	9. Name and Address of Curren		30	····	Florida Statutes  10. Name and Address of New	
GAN	IADE, TERESITA O		<del></del>	81 Name		
	MEADOW DALE DR.				GANMOE, KYM G	ODOFREDO O.
	ARWATER FL 34842			82 Street Address (P.O. Box Number is Not Acceptable)		
	ANTINIEN LE OTOTE		-	83	507 METOOND	76 6 066.
				64 City	t AR WATER	FL 85 Zip Code 24
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508 Florida State	the ah	ove-named co	progration submits this statement for the	FL 34627
office or r	egistered agent, or both, in the State	of lorida. Such change was	authorized	by the corpo	orporation submits this statement for the ration's board of directors. I hereby ac	cept the appointment as registered
	m tamber with, and accept the onliga	ons at, Section 607.0505, F	-lorida Statu	des.		5.30.97
SIGNATURE	Signature, typed or printed name of registered ager	at and title if applicable. (M	VIL Displayed	Agant pignalura so	quired whon reinstaling)	0 . 20 . 77
12.	OFFICERS AND		13.	Ageni signature ta		FICERS AND DIRECTORS IN 12
TITLE	PAST	DELETE	1.1 111	LE T	P	Change Addition
NAME	GANADE, TERESITA O	<del></del>	1.2 NA		CHAMPE STEPHEN	
STREET ADDRESS	1507 MEADOW DALE DRIVE			PEET ADODESCO	674 NADE, STEPHEN 1507 METOON WHI	E DR.
CITY-ST-ZIP	CLEARWATER FL			Y-ST-ZIP	CLEAR WATER F	L 34624
TITLE	D	DELETE	2.1 (0)	E	CLEAR WATER, F	Change Addition
NAME	GANADE, TERESITA O		2.2 NA	VF.	A-amilante vivlas 650	DI 54 (20 )
STREET ADDRESS	1507 MEADOW DALE DRIVE			REET ADDRESS	I TAT MEND ON PI	ME OR.
CITY-ST-ZIP	CLEARWATER FL			Y-ST-ZIP	CICAR WATER F	1 34624
TITLE		☐ DELE1E	3.1 Tills	.t	CANADE, KYM GO 1507 MEMD ON DI CLEME WATER , F  PANAME, RAMMUND 1509 MEMD ON CLEMEWATER	Change Addition
NAME			3.2 NA)	AE .	PANAGE, RAMMUND	
STREET ADDRESS			33 STR	EET ADDRESS	1504 MEMO ON	DALE DR.
CITY-ST-ZIP				Y-SI-7/P	CLEARWATER	FL 34024
TITLE		DELETE	4.1 1(1)	.E		Change Addition
NAME			4. 2 NA	ME		
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				Y-\$1-2IP		
TITLE		DELETE	5.1 7(1)			Change Addition
NAME		<del></del> -	5.2 NAM			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				V-S1-ZIP		
TITLE		DELETE	6.1 TITU			☐ Change ☐ Addition
NAME			6.2 NAM			C Change E Rodillon
STREET ADDRESS				EET ADDRESS		ļ
CITY-ST-ZIP				1		ŀ
MIL.91.5IL			6.4 CITY	7-ST-ZIP		

I do 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.