

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000003198

**FILED**  
**Feb 07, 2023**  
**Secretary of State**  
**7331362858CC**

**Entity Name:** MEADOWLAKE PALM HARBOR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2690 CORAL LANDINGS BLVD  
OFFICE  
PALM HARBOR, FL 34684

**Current Mailing Address:**

2690 CORAL LANDINGS BLVD  
OFFICE  
PALM HARBOR, FL 34684

**FEI Number: 20-4642795**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SUNSHINE PROPERTY MANAGEMENT SERVICES INC.  
3005 COUNTRY WOODS LANE  
PALM HARBOR, FL 34683 US

*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: SHARI MORRISON**

**02/07/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name WILLIAMS GILBERT, TERESA  
Address P.O. BOX 1372  
City-State-Zip: PALM HARBOR FL 34682

Title VP  
Name YORK, MATT  
Address P.O. BOX 1372  
City-State-Zip: PALM HARBOR FL 34682

Title SECRETARY  
Name CALHOUN, STEPHEN  
Address P.O. BOX 1372  
City-State-Zip: PALM HARBOR FL 34682

Title TREASURER  
Name ANDERSON, CHRISTOPHER  
Address P.O. BOX 1372  
City-State-Zip: PALM HARBOR FL 34682

Title D  
Name MCSOLEY, STEPHEN  
Address P.O. BOX 1372  
City-State-Zip: PALM HARBOR FL 34682

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: TERESA WILLIAMS GILBERT**

**PRESIDENT**

**02/07/2023**

Electronic Signature of Signing Officer/Director Detail

Date