

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000006165

**Entity Name:** MEADOW WOODS COVE HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 09, 2019**  
**Secretary of State**  
**1737510363CC**

**Current Principal Place of Business:**

801 N. MAIN STREET  
KISSIMMEE, FL 34744

**Current Mailing Address:**

801 N. MAIN STREET  
KISSIMMEE, FL 34744 US

**FEI Number: 20-5049354**

**Certificate of Status Desired: No**

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

FERDINANDSEN ENTRERPRISES  
801 N. MAIN STREET  
KISSIMMEE, FL 34744 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name SOTO, FRANKIE  
Address 801 N. MAIN STREET  
City-State-Zip: KISSIMMEE FL 34744

Title SECRETARY, TREASURER  
Name LOPEZ, JOSE  
Address 801 N. MAIN STREET  
City-State-Zip: KISSIMMEE FL 34744

Title D  
Name VASQUEZ, JOSE  
Address 801 N. MAIN STREET  
City-State-Zip: KISSIMMEE FL 34744

Title VP  
Name GIOCOCHEA, FRANCISCO  
Address 801 N. MAIN STREET  
City-State-Zip: KISSIMMEE FL 34744

Title MANAGER  
Name FERDINANDSEN ENTERPRISES, INC  
Address 801 N. MAIN STREET  
City-State-Zip: KISSIMMEE FL 34744

*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: FERDINANDSEN ENTERPRISES, INC**

**MANAGER**

**04/09/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date