## 2003 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT# 433753** 

FILED Apr 14, 2003 Secretary of State

Entity Name: MERIDIAN MANAGEMENT CORPORATION

a. octronic Signature of Registered ancing Trust Fund Contribution ( ).	:: Name and Addr			
UITE 300 H, FL 32082 US  6 FEI Number Applied For ( ) c of Current Registered Agent  00 . 32201 US  Intity submits this statement for t a.  ctronic Signature of Registered  ancing Trust Fund Contribution ( ).	FEI Number Not Applicable of the purpose of changing its regi	( ) Certificate of Status Desired ( ) ress of New Registered Agent: istered office or registered agent, or both,		
H, FL 32082 US  FEI Number Applied For ( )  of Current Registered Agent  00  32201 US  ntity submits this statement for ta.  ctronic Signature of Registered  ancing Trust Fund Contribution ( ).	:: Name and Addr	ress of New Registered Agent: istered office or registered agent, or both,		
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ancing Trust Fund Contribution ( ).	Agent	Date		
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OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
( ) Delete DONIS P, NORTH SUITE 300 EDRA BEACH, FL 32082	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
NORTH SUITE 300	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
NORTH SUITE 300	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
NORTH SUITE 300	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
	ELLIOTT S, NORTH SUITE 300 EDRA BEACH, FL 32082  ( ) Delete FIELD, THOMAS R NORTH SUITE 300 EDRA BEACH, FL 32082	( ) Delete Title: ELLIOTT S, Name: NORTH SUITE 300 Address: EDRA BEACH, FL 32082 City-St-Zip:  ( ) Delete Title: FIELD, THOMAS R Name: NORTH SUITE 300 Address: EDRA BEACH, FL 32082 City-St-Zip:  ( ) Delete Title: FIELD, THOMAS R Name: NORTH SUITE 300 Address: Name: NORTH SUITE 300 Address:		

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE. DONIS PHORNE PD 04/14/2003		PD	
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