2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 05, 2006
Secretary of State

DOCUMENT# L04000008934

Entity Name: MERIDIAN FINANCIAL SERVICES, LLC

Current Principal Place of Business:

6411 OPEN PASTURE COURT
WESLEY CHAPEL, FL 33544

New Principal Place of Business:

34824 ARBOR GREEN PL
ZEPHYRHILLS, FL 33541

Current Mailing Address:

6411 OPEN PASTURE COURT
WESLEY CHAPEL, FL 33544

New Mailing Address:

34824 ARBOR GREEN PL
ZEPHYRHILLS, FL 33544

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARIAS, RAYMOND G
34824 ARBOR GREEN Pl
ZEPHYRHILLS, FL 33541 US

Name and Address of New Registered Agent:

ARIAS, RAYMOND G
34824 ARBOR GREEN PL
ZEPHYRHILLS, FL 33541 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: RAYMOND G. ARIAS 02/05/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: HADDIGAN, MICHAEL S
Address: 11 SHUMARD CT. E.
City-St-Zip: HOMOSASSA, FL 34446

Title: MGRM ( ) Delete
Name: ARIAS, RAYMOND G
Address: 6411 OPEN PASTURE COURT
City-St-Zip: WESLEY CHAPEL, FL 33544

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: ARIAS, RAYMOND G
Address: 34824 ARBOR GREEN PL
City-St-Zip: ZEPHYRHILLS, FL 33541

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RAYMOND G. ARIAS MGRM 02/05/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date