

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 15, 2009  
Secretary of State**

DOCUMENT# N03000004944

Entity Name: THE MERIDIAN CONDOMINIUM ASSOCIATION OF TAMPA, INC.

**Current Principal Place of Business:**

1212 E MERIDIAN  
TAMPA, FL 33602

**New Principal Place of Business:**

4131 GUNN HWY  
TAMPA, FL 33618

**Current Mailing Address:**

4131 GUNN HWY  
TAMPA, FL 33618

**New Mailing Address:**

FEI Number: 20-1006633      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BECKER & POLIAKOFF, PA  
311 PARK PLACE BLVD, STE. 250  
CLEARWATER, FL 337593977 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GARNER, STEPHEN J  
Address: 560 BOSPHOROUS AVE  
City-St-Zip: TAMPA, FL 33606

Title: PD ( ) Delete  
Name: WILSON, FRANK  
Address: 1212 E WHITING #306  
City-St-Zip: TAMPA, FL 33602

Title: SD ( ) Delete  
Name: BENTLEY, ERIN  
Address: 1212 E WHITING #203  
City-St-Zip: TAMPA, FL 33602

Title: TD ( ) Delete  
Name: SMITH, STEVE  
Address: 102 S 12TH STREET  
City-St-Zip: TAMPA, FL 33602

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: WILSON, FRANK  
Address: 4131 GUNN HWY  
City-St-Zip: TAMPA, FL 33618

Title: SD (X) Change ( ) Addition  
Name: BENTLEY, ERIN  
Address: 4131 GUNN HWY  
City-St-Zip: TAMPA, FL 33618

Title: TD (X) Change ( ) Addition  
Name: SMITH, STEVE  
Address: 4131 GUNN HWY  
City-St-Zip: TAMPA, FL 33618

Title: D (X) Change ( ) Addition  
Name: GARDNER, STEPHEN  
Address: 4131 GUNN HWY  
City-St-Zip: TAMPA, FL 33618

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK WILSON

PD

04/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date