


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2007 8:00 am
Secretary of State

01-12-2007 90017 048 ***158.75

DOCUMENT # P030Q0069021

1. Entity Name
MERIDIAN CONSTRUCTORS, INC.



Principal Place of Business Mailing Address

13350 WEST COLONIAL DRIVE **13350 WEST COLONIAL DRIVE**
SUITE 320 **SUITE 320**
WINTER GARDEN, FL 34787 US **WINTER GARDEN, FL 34787 US**

20001277



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

4525 VINELAND RD. **4525 VINELAND ROAD**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
SUITE 207 **SUITE 207**

01082007 Chg-P CR2E034 (12/06)

City & State City & State

ORLANDO **ORLANDO**

Zip Country Zip Country

32811 **USA** **32811** **USA**

4. FEI Number Applied For

20-0054127 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MULLIGAN, JENNIFER W
13350 WEST COLONIAL DRIVE
SUITE 320
WINTER GARDEN, FL 34787

7. Name and Address of New Registered Agent

Name **JENNIFER W. MULLIGAN**
 Street Address (P.O. Box Number is Not Acceptable)
4725 VINELAND RD.
SUITE 207
 City **ORLANDO** **FL** Zip Code **32811**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Jennifer W. Mulligan* **JENNIFER W. MULLIGAN, SEC/TREAS** **1.9.07**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO MULLIGAN, RICHARD B 13350 WEST COLONIAL DRIVE SUITE 320 WINTER GARDEN, FL 34787 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECR MULLIGAN, JENNIFER W 13350 WEST COLONIAL DRIVE SUITE 320 WINTER GARDEN, FL 34787 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Richard B. Mulligan* **CEO - RICHARD B. MULLIGAN** **407654-6523**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #