

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000011659

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: MERIDIAN CONSULTING, INC.

## Current Principal Place of Business:

2864-C REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308 US

## New Principal Place of Business:

1809 MICCOSUKEE COMMONS DRIVE  
SUITE 110  
TALLAHASSEE, FL 32308 US

## Current Mailing Address:

P. O. BOX 14989  
TALLAHASSEE, FL 32317 US

## New Mailing Address:

FEI Number: 59-3363051      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BLACK, JOHN F III  
2864-C REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308 US

## Name and Address of New Registered Agent:

BLACK, JOHN F III  
1809 MICCOSUKEE COMMONS DRIVE  
SUITE 110  
TALLAHASSEE, FL 32308 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

01/06/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BLACK, JOHN F III  
Address: 3665 DWIGHT DAVIS DR  
City-St-Zip: TALLAHASSEE, FL 32312

Title: STD ( ) Delete  
Name: BLACK, LAURIE R  
Address: 3665 DWIGHT DAVIS DR  
City-St-Zip: TALLAHASSEE, FL 32312

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: LAURIE R. BLACK

Electronic Signature of Signing Officer or Director

STD

01/06/2005

Date