2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000071194

Entity Name: TW OAKS MERIDIAN, INC.

Current Principal Place of Business:

4900 N. SCOTTSDALE ROAD

SUITE 2000

SCOTTSDALE, AZ 85251

Current Mailing Address:

4900 N. SCOTTSDALE ROAD **SUITE 2000**

SCOTTSDALE, AZ 85251

FEI Number: 65-0858920 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCOTTSDALE AZ 85251

NRAI SERVICES, INC. 515 E. PARK AVENUE TALLAHASSEE, FL 32301 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:

City-State-Zip:

Title

Electronic Signature of Registered Agent

Date

FILED Jan 23, 2013

Secretary of State

CC5575790278

Officer/Director Detail:

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Title PRESIDENT, DIRECTOR Title ASST. SECRETARY, DIRECTOR

STEFFENS, LOUIS E Name Name MERRILL, S. TODD

Address 1211 N. WESTSHORE BLVD Address 1211 N. WESTSHORE BLVD **SUITE 512**

SUITE 512

TAMPA FL 33607

ASST. SECRETARY

City-State-Zip:

Title

TAMPA FL 33607 TAMPA FL 33607 City-State-Zip: City-State-Zip:

Title SECRETARY, VP Title TREASURER, VP

SHERMAN, DARRELL C Name MILLER, DOUGLAS D Name

4900 N. SCOTTSDALE ROAD 1211 N. WESTSHORE BLVD Address Address

SUITE 2000 SUITE 512

CAMPBELL, MICHELLE M Name Name ESTRADA, CAROLINE G

501 N. CATTLEMEN RD. 4900 N. SCOTTSDALE ROAD Address Address

SUITE 100 **SUITE 2000**

City-State-Zip: SARASOTA FL 34232 City-State-Zip: SCOTTSDALE AZ 85251

Title CFO, VP Title ASST. TREASURER, VP

Name CONE, C. DAVID Name BOYD, CALVIN

Address 4900 N. SCOTTSDALE ROAD 4900 N. SCOTTSDALE ROAD Address

SUITE 2000 SUITE 2000

City-State-Zip: SCOTTSDALE AZ 85251 City-State-Zip: SCOTTSDALE AZ 85251

I hereby 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 all other like empowered.

SIGNATURE: CAROLINE G. ESTRADA

ASST. SECRETARY

01/23/2013

Electronic Signature of Signing Officer/Director Detail

Date