## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0400008934

Entity Name: MERIDIAN FINANCIAL SERVICES, LLC

#### **Current Principal Place of Business:**

3589 E GULF TO LAKE HWY INVERNESS, FL 34453

## **Current Mailing Address:**

P.O. BOX 5096 HOMOSASSA SPRINGS, FL 34447

# FEI Number: NOT APPLICABLE

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

HADDIGAN, MICHAEL S 3589 E GULF TO LAKE HWY INVERNESS, FL 34453 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                     | E: MICHAEL HADDIGAN                      |                 |                         | 04/10/2017 |
|-------------------------------|--|-----------------|-------------------------|------------|
|                               | Electronic Signature of Registered Agent |                 |                         | Date       |
| Authorized Person(s) Detail : |  |                 |                         |            |
| Title                         | PRES                                     | Title           | VP                      |            |
| Name                          | HADDIGAN, MICHAEL S                      | Name            | HADDIGAN, YOSABELLE M   |            |
| Address                       | 3589 E GULF TO LAKE HWY                  | Address         | 3589 E GULF TO LAKE HWY |            |
| City-State-Zip:               | INVERNESS FL 34453                       | City-State-Zip: | INVERNESS FL 34453      |            |

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL S. HADDIGAN

PRES

04/10/2017 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 10, 2017 Secretary of State CC6996185903

Certificate of Status Desired: No