



2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # 328201 1. Entity Name MEREDITH REALTY, INC.	
--	---

Principal Place of Business 1649 FORUM PLACE SUITE 11 WEST PALM BEACH, FL 33401	Mailing Address 1649 FORUM PLACE SUITE 11 WEST PALM BEACH, FL 33401
---	---

DO NOT WRITE IN THIS SPACE


01042007 No Chg-P CR2E034 (11/05)
4. FEI Number **59-1212191** Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**KIRBY, JOSEPH H
1649 FORUM PLACE
SUITE 11
WEST PALM BEACH, FL 33401**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when restate) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KIRBY, JOSEPH H. 1649 FORUM PLACE WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS MEREDITH, SARA B. 1649 FORUM PLACE WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEREDITH, SARA B. 1649 FORUM PLACE WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000688196
04/10/07-80070-012 150.00
DO NOT WRITE IN THIS SPACE

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:  3/23/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #