2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DOCUMENT # A23387

1. Entity Name

VOLÚSIA MERIDIAN LIMITED PARTNERSHIP



FILED Apr 11, 2008 08:00 A Secretary of State

Principal Place of Business

101 EAST STATE STREET KENNETT SQUARE, PA 19348 Mailing Address

101 EAST STATE STREET KENNETT SQUARE, PA 19348



DO NOT WRITE IN THIS SPACE

03312008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 52-1493169

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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		-
Signature, typed or printed name of registered agent and title if applicable	ı	DATE

FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION F93000005223 DOCUMENT # MERIDIAN HEALTH, INC. STREET ADDRESS. 101 E.STATE STREET City-S1-ZIP KENNETT SQUARE, PA 19348 DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAMI STREET ADDRESS CHY-St-ZIP DOCUMENT / STREET ADDRESS CHTY-ST-ZIP DOCUMENT # STREET ADDRESS

000000892806 04/23/08-80080-006 500.00

DO NOT WRITE IN THIS SPACE

14. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/7/2008

610-72-2118