2006 LIMITED LIABILITY COMPANY

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT DOCUMENT # L02000028698 1. Entity Name

FILED Mar 13, 2006 08:00 AM **Secretary of State**

Principal Place of Business

MERIDIAN CREEK, LLC

7661 LAKE WORTH RD LAKE WORTH, FL 33467 Malling Address

7661 LAKE WORTH RD LAKE WORTH, FL 33467



01172006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 81-0578874 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KOSBERG, HARVEY 11593 SOUTH BREEZE PLACE WELLINGTON, FL 33467

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SIGNATURE.	tions of registered agent.			
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	DATE	
F	iling Fee is \$50.00 lue by May 1, 2006		000000406956 03/23/06 30030-020 50,00	
9.	MANAGING MEMBERS/MANAGERS	······································		
NAME STREET ADDRESS CHY-ST-ZP	MGRM KOSBERG, HARVEY 11593 SOUTH BREEZE PLACE WELLINGTON, FL 33467			
TITLE NAME STREET ADDRESS CHY-ST-ZIP				
TITLE HAMIC STREET ADDRESS CITY-ST-ZIP		DO	O NOT WRITE	
TITLE HAME STREET ADDRESS CITY -ST -ZIP		IN	THIS SPACE	
TITLE NAME STRUTT ADDRESS				

11. 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 is true and adcurate and that my 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 distee emphasized to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #