

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000089690

**FILED**  
**Jul 01, 2005**  
**Secretary of State**

**Entity Name:** MERIDIAN OPERATIONS, LLC

**Current Principal Place of Business:**

1900 S. HICKORY STREET, SUITE B  
MELBOURNE, FL 32901

**New Principal Place of Business:**

550 CIDCO ROAD  
COCOA, FL 32926

**Current Mailing Address:**

1900 S. HICKORY STREET, SUITE B  
MELBOURNE, FL 32901

**New Mailing Address:**

550 CIDCO ROAD  
COCOA, FL 32926

**FEI Number:** 20-2048698      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

FALLANCE, JAMES H  
FALLACE & LARKIN, L.C.  
1900 S HICKORY STREET, STE A  
MELBOURNE, FL 32901 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: RMD AMERICAS USA, LL, C  
Address: 158 N HARBOR CITY BLVD  
City-St-Zip: MELBOURNE, FL 32935

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: RMD AMERICAS USA, LL, C  
Address: 550 CIDCO ROAD  
City-St-Zip: COCOA, FL 32926

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: MARY K MERRITT

CFO

07/01/2005

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date