2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000096679

1. Entity Name

Principal Place of Business

MERÍDIAN BENTON LAKE POWELL, LLC



Mailing Address

3811 TURTLE CREEK BLVE., SUITE 1850 DALLAS, TX 75219

3811 TURTLE CREEK BLVE., SUITE 1850 DALLAS, TX 75219 #25901

FILED
Jul 11, 2008 08:00 AM
Secretary of State



07072008 No Chg-LLC

CR2E083 (12/07)

| 4. FEI Number | | Applied For |
|---------------|---|---------------|
| 20-3579308 | | Not Applicabl |
| | _ | |

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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|--------------|------|-----|-----|
| IN .7 | THIS | SPA | CE |

| | named entity submits this statement for the purpose of changin ions of registered agent. | g its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept |
|--|--|---|
| SIGNATURE_ | Signature, typed or printed name of registered agent and title II applicable | (NOTE: Registered Agent signature required when reinstating) DATE |
| | E NOWIII FEE IS \$138.75 In accordance we liability company | vith s. 607.193(2)(b), F.S., the limited y did not receive the prior notice. |
| 9. | MANAGING MEMBERS/MANAGERS | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM RONCK, DAVID K 3811 TURTLE CREEK BLVE., SUITE 1850 DALLAS, TX 75219 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | U00000354274 07/11/08-80008-001 138.75 |
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| 11. I hereby o | certify that the information supplied with this filing does not qua | ulfy for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information |

11. I nereby 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 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:

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

7/8/08

214~580-120

Daylime Phone #