2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000099789

1. Entity Name

MERIDIAN APPRAISAL SERVICES, LLC



FILED Apr 21, 2008 08:00 A Secretary of State

Principal Place of Business 2805 W. BUSCH BLVD.

SUITÉ 221 TAMPA, FL 33618 U Mailing Address

2805 W. BUSCH BLVD.

SUITE 221

TAMPA, FL 33618 US



04172008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5716916 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

GILBERT, DIANE M 3105 BELMORE RD TAMPA, FL 33618

CITY-ST-ZIP

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8.	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.	
SI	SIGNATURE	<u> </u>

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE !S \$138.75 After May 1, 2008 Fee will be \$538.75 U00000908313 05/06/08-80024-008 138.75

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOORE, JAMES C 2805 W. BUSCH BLVD. , SUITE 221 TAMPA, FL 33618	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GILBERT, DIANE M MAI,SRA 2805 W. BUSCH BLVD., SUITE 221 TAMPA, FL 33618	
TITLE NAME STREET ADDRESS CITY-SI-ZIP		
TITLE NAME STREET ADDRESS CITY+ST+ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		

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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 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: DIMEN, GIVE DIANEM, GIVE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DIANE M. GILBERT

4/17/08 813/350-9584

Daytime Phone #