

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001317

FILED
May 01, 2007
Secretary of State

Entity Name: MERIDIAN IV AT THE OAKS PRESERVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

BETH CALLANS MANAGEMENT CORP.
595 TOWN CENTER PKWY
BRADENTON, FL 342024175

New Principal Place of Business:

BETH CALLANS MANAGEMENT CORP.
409 NORTH POINT RD.
OSPREY, FL 34229

Current Mailing Address:

BETH CALLANS MANAGEMENT CORP.
595 TOWN CENTER PKWY
BRADENTON, FL 342024175

New Mailing Address:

BETH CALLANS MANAGEMENT CORP.
595 BAY ISLES RD., SUITE 200
LONGBOAT KEY, FL 34228

FEI Number: 20-1544987 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BETH CALLANS MANAGEMENT CORP.
595 BAY ISLES RD. STE 200
BRADENTON, FL 342024175 US

Name and Address of New Registered Agent:

BETH CALLANS MANAGEMENT CORP.
595 BAY ISLES RD. STE 200
LONGBOAT KEY, FL 34228 US

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: BETH CALLANS

05/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WALKER, MICHAEL
Address: 595 BAY ISLES RD. #201
City-St-Zip: BRADENTON, FL 342024175

Title: VD () Delete
Name: BROOKS, VICTOR
Address: 595 BAY ISLES RD. #201
City-St-Zip: BRADENTON, FL 342024175

Title: S () Delete
Name: RICKARD, CAROL
Address: 595 BAY ISLES RD. #201
City-St-Zip: BRADENTON, FL 342024175

Title: T () Delete
Name: DEAN, STANLEY
Address: 595 BAY ISLES RD. #201
City-St-Zip: BRADENTON, FL 342024175

Title: COVP () Delete
Name: ANDERSON, STEVEN
Address: 595 BAY ISLES RD. #201
City-St-Zip: LONGBOAT KEY, FL 34228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WALKER, MICHAEL
Address: 409 NORTH POINT RD
City-St-Zip: OSPREY, FL 34229

Title: VD (X) Change () Addition
Name: BROOKS, VICTOR
Address: 409 NORTH POINT RD
City-St-Zip: OSPREY, FL 34229

Title: S (X) Change () Addition
Name: RICKARD, CAROL
Address: 409 NORTH POINT RD
City-St-Zip: OSPREY, FL 34229

Title: T (X) Change () Addition
Name: DEAN, STANLEY
Address: 409 NORTH POINT RD
City-St-Zip: OSPREY, FL 34229

Title: COVP (X) Change () Addition
Name: ANDERSON, STEVEN
Address: 409 NORTH POINT RD
City-St-Zip: OSPREY, FL 34229

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL WALKER

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date