

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000052846

1. Entity Name

THE MERIDIAN GROUP, INC.

FILED

Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90046 007 ***150.00

Principal Place of Business

1272 THE POINTE DRIVE
W. PALM BEACH FL 33409

Mailing Address

1272 THE POINTE DRIVE
W. PALM BEACH FL 33409

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1018428

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

GEORGE B. MCELROY, JR.

Street Address (P.O. Box Number is Not Acceptable)

1272 THE POINTE DR.

City

WEST PALM BEACH FL

Zip Code

33409

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.

SIGNATURE

Signature, typed or printed name of registered agent, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

GEORGE B. MCELROY JR. 4-16-01

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME MCELROY, GEORGE B JR.
STREET ADDRESS 1272 THE POINTE DRIVE
CITY-ST-ZIP W. PALM BEACH FL 33409

☐ Delete

TITLE
NAME
STREET ADDRESS
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☐ Change ☐ Addition

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☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE B. MCELROY JR.

Date

Daytime Phone #

4-16-01 561
640-3011

CR2E034 (10/00)