

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000080891

Entity Name: STEPHANIE MEID, P.A.

FILED  
Apr 17, 2008  
Secretary of State

## Current Principal Place of Business:

22418 PANTHER RUN COURT  
LAND O LAKES, FL 34639

## New Principal Place of Business:

24149 HIDEOUT TRAIL  
LAND O LAKES, FL 34639

## Current Mailing Address:

22418 PANTHER RUN COURT  
LAND O LAKES, FL 34639

## New Mailing Address:

24149 HIDEOUT TRAIL  
LAND O LAKES, FL 34639

FEI Number: 03-0524259

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

,MEID, STEPHANIE  
22418 PANTHER RUN COURT  
LAND O LAKES, FL 34639 US

## Name and Address of New Registered Agent:

,MEID, STEPHANIE  
24149 HIDEOUT TRAIL  
LAND O LAKES, FL 34639 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:

04/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MEID, STEPHANIE  
Address: 22418 PANTHER RUN COURT  
City-St-Zip: LAND O LAKES, FL 34639

Title: VTD ( ) Delete  
Name: MEID, TOM  
Address: 22418 PANTHER RUN COURT  
City-St-Zip: LAND O LAKES, FL 34639

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MEID, STEPHANIE  
Address: 24149 HIDEOUT TRAIL  
City-St-Zip: LAND O LAKES, FL 34639

Title: VTD (X) Change ( ) Addition  
Name: MEID, TOM  
Address: 24149 HIDEOUT TRAIL  
City-St-Zip: LAND O LAKES, FL 34639

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHANIE MEID

PRES

04/17/2008

Electronic Signature of Signing Officer or Director

Date