FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED
AND
FILED

95 MAY -1 AM 8:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000076541 (0)

1. Entity Name

MERIDIAN INVESTMENT & MANAGEMENT, INC.

Principal Office Address

530 1/2 OLD MAIN STREET
BRADENTON FL 34205
US

Mailing Address

530 1/2 OLD MAIN STREET
BRADENTON FL 34205
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/04/1993	3a. Date of Last Report: 04/28/1994
4. FEI Number: 65-0446181	Applied For / Not Applicable
5. Certificate of Status Desired: ☑	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: ☑ Yes ☐ No	

21 Name and Address
22 State Agent's Fee
23 City & State
24 Zip
25 County

26 Name and Address
27 State Agent's Fee
28 City & State
29 Zip
30 County

9. Name and Address of Current Registered Agent

ROOT, CURTIS S
2305 QUAIL COURT
BRADENTON FL 34209

10. Name and Address of New Registered Agent

81 Name: MARGARET M. CLINE
82 Street Address (P.O. Box Number is Not Acceptable): 530 1/2 OLD MAIN ST.
83
84 City: BRADENTON FL 85 Zip Code: 34205

11. Pursuant to the provisions of section 607.1005, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.

SIGNATURE: MARGARET M. CLINE Margaret M. Cline 4/27/95
(Typed or Printed Name of Person Signing) (Registered Agent's Signature, if Changing) (Date)

12. OFFICER AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
31 PD 32 NAME: WRIGHT, MARTHA S. 33 ADDRESS: 2305 QUAIL COURT 34 CITY-ST-ZIP: BRADENTON FL	81 ☐ Change ☐ Addition 82 NAME 83 ADDRESS: 530 1/2 OLD MAIN ST. 84 CITY-ST-ZIP: BRADENTON, FL 34205
35 SD 36 NAME: CLINE, MARGARET M. 37 ADDRESS: 3716 15TH AVE., W 38 CITY-ST-ZIP: BRADENTON FL	85 ☐ Change ☐ Addition 86 NAME 87 ADDRESS: 530 1/2 OLD MAIN ST. 88 CITY-ST-ZIP: BRADENTON, FL 34205
39 D 40 NAME: ROOT, CURTIS S. 41 ADDRESS: 2305 QUAIL COURT 42 CITY-ST-ZIP: BRADENTON FL	89 ☑ Change ☐ Addition 90 NAME: DELETE 91 ADDRESS 92 CITY-ST-ZIP
43 44 NAME 45 ADDRESS 46 CITY-ST-ZIP	93 D ☐ Change ☑ Addition 94 NAME: JOHN D. LEHMAN, JR. 95 ADDRESS: 530 1/2 OLD MAIN ST. 96 CITY-ST-ZIP: BRADENTON, FL 34205
47 48 NAME 49 ADDRESS 50 CITY-ST-ZIP	97 ☐ Change ☐ Addition 98 NAME 99 ADDRESS 100 CITY-ST-ZIP
101 102 NAME 103 ADDRESS 104 CITY-ST-ZIP	105 ☐ Change ☐ Addition 106 NAME 107 ADDRESS 108 CITY-ST-ZIP

14. I hereby certify that the information supplied with this report, including any required amendment, is true, accurate and complete as of the date of filing this report. I further certify that the information indicated on this report or supplemental annual 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 12 or Block 13 with an address, with an asterisk, or is indicated as the authorized person to execute this report.

SIGNATURE: Margaret M. Cline MARGARET M. CLINE 4/27/95 813-745-3626
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

03136755 CP