

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 02, 2006 8:00 am**  
**Secretary of State**

05-02-2006 90216 034 \*\*\*150.00

**DOCUMENT # P94000077924**

1. Entity Name  
**MERIDIAN SEARCH ASSOCIATES, INC.**



Principal Place of Business 3297 GRAYTON DRIVE SPRING HILL, FL 34609 US	Mailing Address 3297 GRAYTON DRIVE SPRING HILL, FL 34609 US
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**DO NOT WRITE IN THIS SPACE**



04232006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3275283	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**AMERILAWYER  
 343 ALMERIA AVENUE  
 CORAL GABLES, FL 33134**

**DO NOT WRITE IN THIS SPACE**

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KLUGEWCZ, STANLEY G 3297 GRAYTON DRIVE SPRING HILL, FL 34609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KLUGEWCZ, DOROTHY G 3297 GRAYTON DRIVE SPRING HILL, FL 34609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Stanley G Klugewicz* 4-25-06 352-683-5540

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #