

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000026283 (8)

1. Corporation Name

MERIDIAN RESOURCES CORPORATION



Principal Place of Business

2701 N. ROCKY POINT DR.  
SUITE 525  
TAMPA FL 33607

Mailing Address

2701 N. ROCKY POINT DR.  
SUITE 525  
TAMPA FL 33607

2. Principal Place of Business

21 150 Second Ave. N.

Suite, Apt. #, etc.

22 Suite 970

City & State

23 St. Petersburg, FL

Zip

24 33701

Country

2a. Mailing Address

26 150 Second Ave. N.

Suite, Apt. #, etc.

27 Suite 970

City & State

28 St. Petersburg, FL

Zip

29 33701

Country

30

3. Date Incorporated or Qualified

03/14/1995

3a. Date of Last Report

4. FEI Number

65-0573457

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

9. Name and Address of Current Registered Agent

PUFFER, JOHN W III  
101 E. KENNEDY BLVD.  
SUITE 2500  
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

(Signature, typed or printed name of registered agent, and date of registration)

(NOTE: Registered Agent signature required when first filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D  
NAME HOOI, LILIES R  
STREET ADDRESS 2701 N. ROCKY POINT DR., #525  
CITY-ST-ZIP TAMPA FL 33607

TITLE ☐ DELETE

D  
NAME CURLEY, GERARD J  
STREET ADDRESS 5960 CENTRAL AVE., SUITE F  
CITY-ST-ZIP ST. PETERSBURG FL 33733

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

1. TITLE ☒ Change ☐ Addition

D  
NAME HOOI, LILIES R  
12 NAME  
13 STREET ADDRESS 150 Second Ave. N., #970  
14 CITY-ST-ZIP St. Petersburg, FL 33701

2. TITLE ☒ Change ☐ Addition

D  
NAME CURLEY, GERARD J  
23 STREET ADDRESS 150 Second Ave. N #970  
24 CITY-ST-ZIP St. Petersburg, FL 33701

3. TITLE ☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4. TITLE ☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5. TITLE ☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6. TITLE ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 30, 96 (813) 994-3411

CR2E034 (12/95)