

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000101098

FILED
Apr 27, 2007
Secretary of State

Entity Name: MERADON CORPORATION

Current Principal Place of Business:

126 PARK AVE
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

126 PARK AVE
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 59-3478329 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAITE, DONALD M
400 ABBEYWOOD LANE
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

WAITE, DONALD M
126 PARK AVENUE
CASSELBERRY, FL 32707 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: _____

Electronic Signature of Registered Agent

04/27/2007

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WAITE, DONALD M
Address: 400 ABBEYWOOD LANE
City-St-Zip: CASSELBERRY, FL 32707

Title: VTS () Delete
Name: WARD, MEREDITH A
Address: 400 ABBEYWOOD LN
City-St-Zip: CASSELBERRY, FL 32707

Title: D () Delete
Name: WAITE, JONATHAN R
Address: 6 MAINSAIL CR.
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WAITE, DONALD M
Address: 126 PARK AVENUE
City-St-Zip: CASSELBERRY, FL 32707

Title: VTS (X) Change () Addition
Name: WARD, MEREDITH A
Address: 126 PARK AVENUE
City-St-Zip: CASSELBERRY, FL 32707

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MEREDITH A. WARD

Electronic Signature of Signing Officer or Director

VTS

04/27/2007

Date