

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000069730

FILED
Feb 19, 2004
Secretary of State

Entity Name: MEREDITH PROPERTIES, INC.

Current Principal Place of Business:

P.O. BOX 2156
LABELLE, FL 339752156

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2156
LABELLE, FL 339752156

New Mailing Address:

FEI Number: 65-0859287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MEREDITH, SR, WILLIAM J
3167 SHELL LANE
LABELLE, FL 339356402 US

Name and Address of New Registered Agent:

MEREDITH, SR, WILLIAM J
3167 SHELL LANE
LABELLE, FL 33935 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: WILLIAM J MEREDITH SR

02/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MEREDITH, PATRICIA G
Address: 3167 SHELL LANE
City-St-Zip: LABELLE, FL 339359492

Title: D () Delete
Name: MEREDITH, JR, WILLIAM J
Address: 12353 NW 1ST
City-St-Zip: PLANTATION, FL 33326

Title: D () Delete
Name: MEREDITH, DEAN J
Address: 10656 DENOEU RD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: MEREDITH, THEODORE I
Address: 22434 BOYLE LANE
City-St-Zip: PALO CEDRO, CA 96073

Title: D () Delete
Name: MEREDITH, DAVIS M
Address: 2712 SE 13 CT
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PATRICIA G MEREDITH

D

02/19/2004

Electronic Signature of Signing Officer or Director

Date