

UBR 2001

DOCUMENT # P98000072496

Entity Name

WM. MEREDITH TR., INC.

APPROVED  
AND  
FILED

01 APR 12 PM 3:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
~~8265~~  
~~8625 West Sunrise Blvd.~~  
~~Plantation, FL 33322~~

Mailing Address  
~~8265~~  
~~8625 West Sunrise Blvd.~~  
~~Plantation, FL 33322~~

2. Principal Place of Business  
1040 N.E. 15th Ave  
Suite, Apt. #, etc.

3. Mailing Address  
1040 N.E. 15th Ave.  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Ft. Lauderdale, Fl.

City & State  
Ft. Lauderdale, Fl.

4. FEI Number  
65-0872899

Applied For  
Not Applicable

Zip  
33304

Country  
Broward

Zip  
33304

Country  
Broward

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
~~Ian Gardner~~  
~~8625 West Sunrise Blvd.~~  
~~Plantation, Fl. 33322~~

7. Name and Address of New Registered Agent  
Name  
Philip S. Ragsdale  
Street Address (P.O. Box Number Is Not Acceptable)  
1040 N.E. 15th Ave.  
City  
Ft. Lauderdale, FL Zip Code  
33304

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.

SIGNATURE Philip S. Ragsdale Philip S. Ragsdale, Registered Agent 04/10/01  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00.**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

| 11. OFFICERS AND DIRECTORS                     |                                                                                                        |                                            | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |                                                                                                         |                                                                              |
|------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------|---------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | Director<br>Paul E. Taylor<br>4701 N.E. 3rd Ave.<br>Bompane Beach, FL 33064                            | <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | 300003995683--1<br>-04/13/01--01003--004<br>****158.75 ****158.75                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | President/Secretary/Director<br>Scott S. Ragsdale<br>725 N.W. 14th Terrace<br>Ft. Lauderdale, FL 33304 | <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | President/Secretary/Director<br>Philip S. Ragsdale<br>1040 N.E. 15th Avenue<br>Ft. Lauderdale, FL 33304 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                        | <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        |                                                                                                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                        | <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        |                                                                                                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                        | <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        |                                                                                                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                        | <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        |                                                                                                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Philip S. Ragsdale Philip S. Ragsdale, Pres. 04/10/01 954-523-0905  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/99)