

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000099359

FILED
Apr 14, 2009
Secretary of State

Entity Name: MECO OF NORTH FLORIDA, INCORPORATED

Current Principal Place of Business:

3626 PHOENIX AVE
JACKSONVILLE, FL 322062357

New Principal Place of Business:

Current Mailing Address:

3626 PHOENIX AVE
JACKSONVILLE, FL 322062357

New Mailing Address:

FEI Number: 65-0968694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, LAMAR W
3626 PHOENIX AVE
JACKSONVILLE, FL 32206 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCUDDER, MARK
Address: PO BOX 48327
City-St-Zip: ATLANTA, GA 32362

Title: VP () Delete
Name: SCUDDER, MICHAEL R
Address: 4471 AMWILER RD
City-St-Zip: DORAVILLE, GA 32360

Title: VP () Delete
Name: SCUDDER, PAMELA
Address: 4471 AMWILER RD
City-St-Zip: DORAVILLE, GA 32360

Title: VP () Delete
Name: MEADORS, MICHAEL
Address: 3626 PHOENIX AVE
City-St-Zip: JACKSONVILLE, FL 32206

Title: ST () Delete
Name: SCOTT, LAMAR W
Address: 3626 PHOENIX AVE
City-St-Zip: JACKSONVILLE, FL 32206

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 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: LAMAR W SCOTT

ST

04/14/2009

Electronic Signature of Signing Officer or Director

Date