

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION ANNUAL REPORT <b>1995</b>		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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**FILED**  
 1995 JUL 27 AM 10:18  
 TALLAHASSEE, FLORIDA

**DOCUMENT # N21687 (1)**

1. Corporation Name  
**MERRITT ISLAND JAYCEES, INC.**

Principal Place of Business 120 VENETIAN WAY STE. 23 MERRITT ISLAND FL 32953 US	Mailing Address P. O. BOX 540799 MERRITT ISLAND FL 32954-0799 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>07/24/1987</b>	3a. Date of Last Report <b>07/06/1994</b>
4. FBI Number <b>59-3018562</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	<b>\$68.75</b> Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**COYLE, THOMAS P**  
**765 MADRAINE ST.**  
**MERRITT ISLAND FL 32953**

10. Name and Address of New Registered Agent

81 Name <b>Preacher, Paul</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>101 Valencia Rd.</b>
83
84 City <b>Rockledge</b>
FL 85 Zip Code <b>32955</b>

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: Paul Justin Preacher (NOTE: Registered Agent signature required when installing) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD <b>NERO, ANTHONY</b> <b>80 CARIB DR.</b> <b>MERRITT ISLAND FL</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD <b>NERO, DONNA</b> <b>80 CARIB DR.</b> <b>MERRITT ISLAND FL</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD <b>WEINER, ROB</b> <b>7489 GLENWOOD RD.</b> <b>COCOA FL</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP	<b>P.D.</b> <b>Preacher, Paul</b> <b>101 Valencia Rd.</b> <b>Rockledge Fl. 32955</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP	<b>VD</b> <b>Preacher, LaMona</b> <b>101 Valencia Rd.</b> <b>Rockledge, Fl. 32955</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP	
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP	
61 TITLE 62 NAME 63 STREET ADDRESS 64 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 017, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Paul Justin Preacher Date: 07/21/95 (407) 639-1452