


2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Jan 13, 2004 8:00 am**  
**Secretary of State**

01-13-2004 90011 046 \*\*\*150.00

DOCUMENT # P02000023091 1. Entity Name MERRILL PARKER SHAW, INC.	
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Principal Place of Business 4928 N DAVIS HWY PENSACOLA, FL 32503	Mailing Address 4928 N DAVIS HWY PENSACOLA, FL 32503
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**DO NOT WRITE IN THIS SPACE**

01052004 No Chg-P CR2E034 (10/03)

4. FEI Number 30-0050216	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

HUSTON, GARY W  
125 W ROMANA ST  
SUITE 800  
PENSACOLA, FL 32501

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PARKER, EDWARD W 34435 LOST RIVER RD. SEMINOLE, AL 36574
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MERRIL, WILLIAM L 508 DRACENA WAY GULF BREEZE, FL 32561
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V SHAW, THEODORE R 5511 CACTUS RD. PENSACOLA, FL- 32506
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Edward W. Parker 1/7/04 (850) 478-4923

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #