

2000 UNIFORM BUSINESS REPORT (UBR)

3/4/00-90023-024-\$50.00-\$50.00

DOCUMENT # P98000108093

1. Entity Name

MERCHANT ASSOCIATES, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR 27 AM 9:28

Principal Place of Business

1462 WINDSOR DRIVE
CLEARWATER FL 33755

Mailing Address

1462 WINDSOR DRIVE
CLEARWATER FL 33755

2. Principal Place of Business

1642 Windsor Dr.
Suite, Apt. #, etc.

3. Mailing Address

1642 Windsor Dr.
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Clearwater, FL

City & State

Clearwater, FL

4. FEI Number

65-0889421

Applied For

Not Applicable

Zip

33755

Country

U.S.

Zip

33755

Country

U.S.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIEGER, RAY
1195 FAIRWAY DRIVE
DUNEDIN FL 34698

out
change of
address →

7. Name and Address of New Registered Agent

Name: Sieger, Ray
Street Address (P.O. Box Number is Not Acceptable): 1642 Windsor Drive
City: Clearwater FL Zip Code: 33755

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 Ray Sieger

Signature, typed or printed name of registered agent and title if applicable.

Ray Sieger

(NOTE: Registered agent signature required when reinstating)

1/19/00

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

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

TITLE	D	<input type="checkbox"/> Delete
NAME	SIEGER, RAY	
STREET ADDRESS	1195 FAIRWAY DRIVE	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	D	<input type="checkbox"/> Delete
NAME	SIEGER, DENISE	
STREET ADDRESS	1195 FAIRWAY DRIVE	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sieger, Ray	
STREET ADDRESS	1642 Windsor Dr.	
CITY-ST-ZIP	Clearwater, FL 33755	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sieger, Denise	
STREET ADDRESS	1642 Windsor Dr.	
CITY-ST-ZIP	Clearwater, FL 33755	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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-04/04/00-81102-817
***100.00 ***100.00

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: Sieger, Ray
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/00 727-443-0836
Date Daytime Phone #

CR2E034 (9/99)