

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 11, 2002 8:00 am**  
**Secretary of State**

08-11-2002 90169 046 \*\*\*\*50.00

DOCUMENT # **L9800002079**

1. Entity Name

**Merritt Island, LLC** ✓

**DO NOT WRITE IN THIS SPACE**

**973605**

2. Principal Place of Business

**3455 Peachtree Trl**

Suite, Apt. #, etc.

**#305-138 Blvd**

City & State

**Duluth GA**

Zip

**30096**

Country

**USA**

3. Mailing Address

**Same**

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

**62-1757856**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**Michael Posner**

Street Address (P.O. Box Number is Not Acceptable)

**WARD, DANIEL, Beverly, Title + Posner P.A.**

**4420 BEACON Cir. #100**

City

**W. Palm Beach**

FL

Zip Code

**33407**

**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.

SIGNATURE

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

DATE

**FEE IS \$50.00**

**Make Check Payable to Department of State  
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**Managing Member**

**EVERAN Sue Edwards**

**3455 Peachtree Trl Blvd**

**#305-138**

**Duluth, GA 30096**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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CITY-ST-ZIP

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IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member of manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

**Joan L. Shepler, Acct Mgr**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

**8-602**

Date

Daytime Phone

CR2E083B (12/01)

*Attchment*

*9-13-05*

MERRITT ISLAND, LLC  
3455 PEACHTREE INDUSTRIAL BLVD. # *198000082879*  
SUITE 305-138  
DULUTH, GA 30096

8-6-2002

Florida Dept of State  
Division of Corporations  
Registration Section  
P.O. Box 6478  
Tallahassee, Florida 32314

RE: Annual Registration

To Whom It May Concern:

Enclosed please find our UBR for Merritt Island, LLC, together with our check #1160 in the amount of \$50.00.

We trust you will accept this with no penalty because although we notified you of our change of address last September 27, 2001, we were never notified of the current registration due for 2002.

Thank you for your time and attention to this matter.

Sincerely,

*Joan L. Shepler*

Joan L. Shepler, Accounting Manager  
Merritt Island, LLC