

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000082182

**Entity Name:** MEG O'MALLEY'S, INC.

**Current Principal Place of Business:**

812 EAST NEW HAVEN AVENUE  
MELBOURNE, FL 32901

**Current Mailing Address:**

812 EAST NEW HAVEN AVENUE  
MELBOURNE, FL 32901 US

**FEI Number:** 59-3596460

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FRESE, GARY B  
930 S HARBOR CITY BLVD, SUITE 505  
MELBOURNE, FL 32901 US

*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

**Officer/Director Detail :**

Title D  
Name BURR, JOHN E  
Address 11 SPINNAKER PT. CT  
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

Title D  
Name MARATHAS, SCOTT J  
Address 611 RIO PINO NORTH  
City-State-Zip: INDIALANTIC FL 32903

Title D  
Name ELMER, MATT  
Address 3524 EGRET DR.  
City-State-Zip: MELBOURNE FL 32901

Title TREASURER  
Name PEAKE, JOHN  
Address 165 BAY SHORE DR.  
City-State-Zip: MELBOURNE BEACH FL 32951

*I hereby 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 all other like empowered.*

**SIGNATURE:** JOHN BURR

**PRESIDENT**

**01/08/2017**

Electronic Signature of Signing Officer/Director Detail

Date