

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 238508

1. Entity Name

MERCHANT TRANSPORT, INC.

FILED

May 08, 2000 8:00 am
Secretary of State

05-08-2000 90049 041 ***150.00

Principal Place of Business

Mailing Address

533 BUNKER RD
P.O. BOX 6115
WEST PALM BEACH FL 33405

533 BUNKER RD
P.O. BOX 6115
WEST PALM BEACH FL 33405-6115

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0903458

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JEAN C. MERCHANT
7700 WEST LAKE DRIVE
LAKE CLARKE SHORES FL 33406

Name

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

City

FL

Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME MERCHANT, JEAN C
STREET ADDRESS 7700 W LAKE DR
CITY-ST-ZIP LAKE CLARKE SHORES FL ☒ Delete

TITLE PD
NAME MERCHANT, MERLE W
STREET ADDRESS 7700 W. LAKE DR
CITY-ST-ZIP LAKE CLARKE SHORES FL 33406 ☐ Change ☒ Addition

TITLE VD
NAME MERCHANT, SHARON J
STREET ADDRESS 607 6TH COURT
CITY-ST-ZIP PALM BEACH GARDENS FL ☐ Delete

TITLE VD
NAME SHARON J. MERCHANT
STREET ADDRESS 143 WENTWORTH CT.
CITY-ST-ZIP JUPITER FL 33458 ☒ Change ☐ Addition

TITLE STD
NAME MERCHANT, LINDA R
STREET ADDRESS 8129 ANDOVER COURT
CITY-ST-ZIP LAKE CLARKE SHORES FL ☒ Delete

TITLE STD
NAME JEAN C. MERCHANT
STREET ADDRESS 7700 W LAKE DR
CITY-ST-ZIP LAKE CLARKE SHORES FL 33406 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)