SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **APPROVED PROFIT** AND FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 AUG 27 AM 11: 16 1996 DIVISION OF CORPORATIONS DOCUMENT # 326069 SECRETARY OF STATE TALLAHASSEE. FLORIDA (2)MERRITT MONUMENT COMPANY INC Principal Place of Business Mailing Address 4822 S. US #1 4822 S. US #1 -09/09/96--01002--013 FORT PIERCE FL 34982 FORT PIERCE FL 34982 \*\*\*\*225.00 \*\*\*\*225.00 3a. Date of Last Report 3. Date Incorporated or Qualified 02/06/1968 04/13/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-1200458 26 Not Applicable Suite, Apt. #, etc Suite, Apl. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 26 Trust Fund Contribution Added to Fees Zip  $Z_{\rm IP}$ Country 8. This corporation has liability for intangible as under s 199,032 Florida Statutes Yes No 24 25 29 30 Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name **BRENNAN.JOHN** 519 S INDIAN RIVER DR Street Address (P.O. Box Number is Not Acceptable) FORT PIERCE FL 33450 83 City **85** Z p Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature type disciproportion over order processing on another trapple, the (NOTE Registered Agent's quature reserved when remaining) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/8) DELETE TITLE 1.1 DILE Change Addition MERRITT, EDWIN S 1.2 NAME CR2E034 STREET ADDRESS 1204 COUNTRY GARDEN LANE 13 STREET ADDRESS FORT PIERCE, FL 0 CITY-ST-ZIP TITLE DELETE 21 TIFLE Change Addition MERRITT, DIANNE W 2 2 NAME 1204 COUNTRY GARDEN LANE STREET ADDRESS 2.3 STREET ADDRESS FORT PIERCE, FL 0 CITY-ST-7IP 2 4 CHTY - ST - ZIF DELFTE 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 34 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS DITY-ST-ZIP 4 4 CITY - ST - ZIF TITLE DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY - ST - ZIP 5.4 CrTY - ST- 7IP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes 1 further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

61 TITLE

62 NAME

DELETE

TITLE

NAME

STREET ADDRESS

SIGNATURE: DIANNE W. Ment to Signature and typed on printed name of signature and typed on printed name of signature.

Jame W Merrit 8/21/96 464-9726

☐ Change ☐ Addition