2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2008
Secretary of State

DOCUMENT# 708349

Entity Name: SOUTH MERRITT ESTATES ASSOCIATION, INC.

Current Principal Place of Business:

2195 S. TROPICAL TRAIL
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 540176
MERRITT ISLAND, FL 32954

New Mailing Address:

FEI Number: 59-2939387 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAYLOR, STEPHEN L
2180 S. TROPICAL TRAIL
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: VANDEBERG, SHARYN
Address: 715 CARAMBOLA DR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: S ( ) Delete
Name: BOATMAN, VIRGINIA
Address: 745 CARAMBOLA DR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: T ( ) Delete
Name: CAYLOR, STEPHEN L
Address: 2180 S. TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32952

Title: V ( ) Delete
Name: PATRICIA, LIVINGSTON
Address: 2195 HERON DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: RICE, KARL
Address: 523 ELLIOTT DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN L. CAYLOR T 03/13/2008

Electronic Signature of Signing Officer or Director — Date