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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 717329

(7)

MERRITT SQUARE MERCHANTS ASSOCIATION, INC.

Principal Place of Business Mailing Address				T VOLUME IN THE CONTRACT OF TH						
777 E. MERRITT ISLAND CAUSEWAY 777 E. MERRITT ISLAND CA MERRITT ISLAND FL 32952-3501 MERRITT ISLAND FL 32952-				VAY						
						 Date Incorporated or Qualified 10/09/1969 	3a.	Date of Last I 05/01/19		
2. Principal Pl. 21	ace of Business	2a. Mailing Address 26				4. FEI Number 23-7153038	Applied For Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			-+	\$8.75 Additional				╣
22		27				5. Certificate of Status Desired	rtificate of Status Desired Fee Required			
City & State	.	City & State				Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees			
Zip 24	Country 25	Zip 29	Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				7
	9. Name and Address of Curren		301	T		10. Name and Address of New I				-
				81 Name		·····				┪ .
RORFRI			Ef	rain Toro				_		
ROBERT E. HOUSE 777 E MERRITT ISLAND CAUSEWAY				82 Street	Address (P.O. Box Number is Not Acceptable) 777 E. Merritt Island Causeway					
MERRITT ISLAND FL 32952				83		/ E. MEILICE IS	Lanu	Cause	:way	┨
METHOL	1 100AND 1 C 02932									
				84 City	Me	rritt Island,	F	85 Zig	2952	
11. Pursuant i or register	to the provisions of Sections 617,0502 red agent, or both, in the State of Floric	and 617.1508, Florida Statutes, da. Such change was authorized	the abo	ove-named oc corporation's	orporation	on submits this statement for the purification of directors. I hereby accept the app	rpose of c	hanging its re	egistered office	ā
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.										
SIGNATURE .	Signature, typed or printed points of logistered event	10 100				uco.	/30/	196		
12.	Significate, typed or printed printe of Constered agent OFFICERS AND		13.	ASSESSED VALUE OF		ADDITIONS/CHANGES TO OF	SICE OR AL	ND DIBECTO	RS IN 12	⊣ହ୍ଲି
TITLE	PD	DELETE	1.1 T	ITI F	PD	7.55116143761741628 10 61	I IOLINO AI	Change	X Addition	(12/95)
NAME	MICHAEL MARY	X-	1.2 N		1	DIII IAW			(A)	
STREET ADDRESS	777 E.MERRITT ISL CSWY		1	TREET ADDRESS	777	RILL, JAY E.MERRITT ISLAND	CCLIV			18
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NAME	BALLIS, TOM		3.2 N			ODC MANOV			₩-	
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NAME	TESTA, DIXIE		4.21	NAME	LIN	DGREN, ANGIE		_ ·		
STREET ADDRESS	777 E MERRITT ISL CSWY		435	TREET ADDRESS	1	E. MERRITT ISLAND	CSUV			
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NAME	HOUSE, ROBERT E		5.2 N	IAME	TOR	O, EFRAIN		- *	_	
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CITY-ST-ZIP			1	TY-ST-ZIP						1

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. I 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 13 if changed, or on an attachment with an address.

SIGNATURE:

NATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/16

Daytime Phone #