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FILED  
May 15 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 726598 (6)

1. Corporation Name

MERRITT ISLAND EXECUTIVE COUNCIL, INC.

Principal Place of Business

850 PAULA AVE  
MERRITT ISLAND FL 32952

Mailing Address

1725 S. MERRIMAC DR.  
MERRITT ISLAND FL 32952-2686  
US



3. Date Incorporated or Qualified  
06/04/1973

3a. Date of Last Report  
04/25/1996

4. FEI Number

59-1961854

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLORES, ROSEMARIE  
1725 S. MERRIMAC DRIVE  
MERRITT ISLAND FL 32952

81 Name

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

83

84 City

FL

85 Zip Code

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 name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE  
NAME MUNDHENK, JAMES  
STREET ADDRESS 850 PAULA  
CITY - ST - ZIP MERRITT ISLAND FL

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

TITLE VD ☐ DELETE  
NAME LAMBERS, MARIAN  
STREET ADDRESS 1180 MONTEGO BAY DRIVE  
CITY - ST - ZIP MERRITT ISLAND FL

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

TITLE TSD ☐ DELETE  
NAME FLORES, ROSEMARIE  
STREET ADDRESS 1725 S. MERRIMAC DRIVE.  
CITY - ST - ZIP MERRITT ISLAND FL

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

TITLE D ☐ DELETE  
NAME FLORES, ADAM  
STREET ADDRESS 1725 S. MERRIMAC DR  
CITY - ST - ZIP MERRITT ISLAND FL 32952

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

TITLE S ☐ DELETE  
NAME VENICE, MARIE  
STREET ADDRESS 513 SEACREST AVE  
CITY - ST - ZIP MERRITT ISLAND FL

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

TITLE D ☐ DELETE  
NAME ALLEN, STANLEY  
STREET ADDRESS 1255 W. SCOTTS AVE.  
CITY - ST - ZIP MERRITT ISLAND FL

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do 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 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.

CR2E037 (9/96)