

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 08:00 AM
Secretary of State

DOCUMENT # F02000001576

1. Entity Name
MEYER REAL ESTATE OF FLORIDA, INC.



Principal Place of Business
1585 GULF SHORES PARKWAY
GULF SHORES, AL 36542

Mailing Address
PO BOX 3609
GULF SHORES, AL 36542



01192005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
63-0832702

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

BALL, BRADEN K JR.
9TH FLOOR, SEVILLE TOWER
226 SOUTH PALAFOX PLACE
PENSACOLA, FL 32501

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Sheila Hodges*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC HODGES, SHEILA 1585 GULF SHORES PARKWAY GULF SHORES, AL 36547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCV KUZMA, SARAH 1585 GULF SHORES PARKWAY GULF SHORES, AL 36542
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/21/05-80026-023 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 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

Sheila Hodges
3/17/05

Date

251-968-7516
Daytime Phone #