FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F47404

(1)

ANDREW H. MERRITT, INC.

FILED Apr 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								
C/O ANDREW H MERRITT 7726 SW 36TH AVE GAINESVILLE FL 32608			7726 SY	C/O ANDREW H MERRITT 7726 SW 36TH AVE GAINESVILLE FL 32808				DO NOT WRITE IN THIS SPACE
	• • • • • • • • • • • • • • • • • • • •					3. Date Incorporated or Qualified		
2. Principal P	look of Dunie	2000	1 9- Maile	2a. Mailing Address				10/06/1981 4. FEI Number Applied For
· · · ·	TACE OF DUSI	1622	26	—¬				4. FEI Number Applied For 59-2127326 Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				\$9.75 Additional	
22		27	27				5. Certificate of Status Desired Fee Required	
City & State 2				City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip		Country	Zip		Cou	ıntry	· · · · · · · · · · · · · · · · · · ·	8. This corporation owes or has paid the current year Intangible
24		25 29 3						Personal Property Tax due June 30. 🗹 Yes 🗌 No
Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent	
MERRITT, ANDREW H						81	Name	
7726 \$W 36TH AVENUE						82	Street Add	dress (P.O. Box Number is Not Acceptable)
GAINESVILLE, FL 32608						83		
V2 .						84	City	85 Zip Code
							,	FL " '
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 ability accept the appointment as registered agent. I am familiar with, and accept the ability accept the appointment as registered agent.								
SIGNATURE SIGNATURE SIGNATURE SIGNATURE								
Signature typed or proved name of the grace agreed agreed and other applicable (NOTE: Registered Agent signature required whe								ired when reinstating) DATE
12.	DP	OFFICERS	AND DIRECTORS	DELETE	13.	T. F		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE		t, andrew h		☐ necele	1.1 1			L_1 Change L_1 Addition
NAME Street address	7726 SV		1.2 NAME 1.3 Street address		4000000			
CITY-ST-ZIP	GAINES		1.4 CITY-					
TITLE	Grante O	TIDELI (C OLOO)		DELETE			11-21	Change Addition
NAME				•	2.2 N			
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP							ST-ZIP	
TITLE				DELETE	3.1 Ti			Change Addition
NAME					3.2 N	AME		
STREET ADDRESS					335	TREET	ADDRESS	
CITY-ST-ZIP					3.4. 0	ITY-S	ST-ZIP	
JILE	· ;			DELETE ,	4.1 %	TLE		Change Addition
NAME					4. 2 N	AME		
STREET ADDRESS					4.3 S	TREET	ADDRESS	
CITY-ST-ZIP				05,575	4.4 C		T-ZIP	
TITLE				☐ DELET E	5.1 10			☐ Change ☐ Addition
NAME	1				5.2 N.			
STREET ADDRESS	*				1		ADDRESS	
CITY-ST-ZIP				☐ DELETE			T-ZIP	Change Addition
TITLE				N.C.C.C	6.1 Ti			Cuarific Manifoli 1
NAME STREET ANDRESS					6.2 N		YDUDESC	
4							ADDRESS 1-ZIP	
UIT-DI-ZIF					0.4 (11.2	1-40	

14. I 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.