

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F85081

1. Entity Name

MERRIWETHER CIRCUIT DESIGN, INC.

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90108 033 ***150.00

Principal Place of Business

Mailing Address

~~727 WEST SUNSET BLVD~~
~~FT. WALTON BCH. FL 32542,~~
US

P.O. BOX 1526
FT. WALTON BCH. FL 32549-1526
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

222 MIRACLE STRIP PKWY SE.

City & State

City & State

FT. WALTON BCH, FL

Zip

Country

Zip

Country

32548

OKA LOOSA

4. FEI Number

59-2198875

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MERRIWETHER, H. ANN
% MERRIWETHER CIRCUIT DESIGN, INC.
~~727 WEST SUNSET BLVD~~
~~FT. WALTON BCH. FL 32547~~

Name

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

222 MIRACLE STRIP PKWY SE.

City

FT. WALTON BCH, FL

FL

Zip Code

32548

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.

SIGNATURE **H. ANN MERRIWETHER**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE

01/08/00

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **STD**
STREET ADDRESS **MERRIWETHER, CHARLES E**
CITY-ST-ZIP **554 CORAL COURT, #209**
FT WALTON BEACH FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **281 VININGS WAY BLVD #1208**
CITY-ST-ZIP **DESTIN, FL 32541**

TITLE ☐ Delete
NAME **PD**
STREET ADDRESS **MERRIWETHER, ANN**
CITY-ST-ZIP **554 CORAL COURT, #209**
FT WALTON BEACH FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **281 VININGS WAY BLVD #1208**
CITY-ST-ZIP **DESTIN, FL 32541**

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STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **CHARLES E. MERRIWETHER**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/08/00 **850-243-8144**
Date Daytime Phone #