FILED

May 05, 2003 8:00 am Secretary of State

05-05-2003 90317 003 ***158.75

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT

F97000000961

1. Entity Name

MERRITT & HARRIS, INC.



Principal Place of Business Mailing Address 110 E. 42ND ST., 12TH FLOOR 110 E. 42ND ST., 12TH FLOOR NEW YORK NY 10017-5685 NEW YORK NY 10017-5685 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 13-2644494 Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BLANTON, EDWIN F Street Address (P.O. Box Number is Not Acceptable) 825 THOMASVILLE RD. TALLAHASSEE FL 32303 City Zip Code 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 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10 11. TITLE Change Addition TITLE ☐ Delete PDC NAME NAME RICHARD, THOMAS C. STREET ADDRESS STREET ADDRESS 110 E. 42ND ST., 12TH FLOOR CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10017-5685 TITI F ☐ Delete ☐ Change Addition NAME WEILAND, ROBERT G. STREET ADDRESS STREET ADDRESS 110 E. 42ND ST., 12TH FLOOR CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10017-5685 TITLE ☐ Delete TITLE _ Change ☐ Addition NAME NAME DOODY, WILLIAM J STREET ADDRESS STREET ADDRESS 110 E. 42ND ST., 12TH FLOOR CITY-ST-7IP CITY-ST-ZIP NEW YORK NY 10017-5685 TITLE ☐ Delete TITLE Change ☐ Addition NAME ROWLAND, CORNELIUS A. NAME

12. 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 10 or Block 11 if

STREET ADDRESS

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CITY-ST-ZIP

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TITLE

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SIGNATURE:

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110 E. 42ND ST., 12TH FLOOR

NEW YORK NY_10017<u>-</u>5685

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