


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 10, 2008 8:00 am
Secretary of State

04-10-2008 90021 025 ***150.00

DOCUMENT # G36146	
1. Entity Name J.H. MERRELL CONSTRUCTION COMPANY, INC.	

Principal Place of Business 930 ORANGE AVENUE PO BOX 7005, DAYTONA BCH SHORES 32116 DAYTONA BEACH FL 32114	Mailing Address 930 ORANGE AVE PO BOX 7005, DAYTONA BCH SHORES 32116 DAYTONA BEACH FL 32114 US
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2. Principal Place of Business - No P.O. Box # 2430 S. Atlantic Ave	3. Mailing Address 2430 S. Atlantic Ave.
Suite, Apt. #, etc. Suite B	Suite, Apt. #, etc. Suite B

1st MOORE CR2E034 (10/07)

City & State Daytona Beach Shores FL	City & State Daytona Beach Shores FL
Zip 32118	Country US

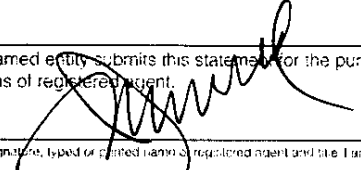
4. FEI Number 59-2332076	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MERRELL, JOHN 930 ORANGE AVENUE DAYTONA BEACH FL 32114
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7. Name and Address of New Registered Agent	
Name Merrell, John H.	
Street Address (P.O. Box Number is Not Acceptable) 2430 S. Atlantic Ave	
Suite B	
City Daytona Beach Shores	FL
Zip Code 32118	

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  **John H. Merrell** **1/25/08**
(NOTE: Registered Agent signature required when re-registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00 May Be**
Trust Fund Contribution. ☐ **Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE PD	<input type="checkbox"/> Delete
NAME MERRELL, JOHN H.	
STREET ADDRESS 2322 SOUTH HALIFAX DR	
CITY-ST-ZIP DAYTONA BEACH FL	
TITLE V	<input type="checkbox"/> Delete
NAME HILLYARD, BOYCE	
STREET ADDRESS 876 PINEAPPLE ROAD	
CITY-ST-ZIP DAYTONA BEACH FL 32119	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:  **John H. Merrell** **1/25/08** **386 253-0471**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR