

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H94012

1. Entity Name

Mersue, Inc.

Principal Place of Business

2100 Country Club Road
Sanford, Florida 32771

Mailing Address

2100 Country Club Road
Sanford, Florida 32771

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2635869

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

00060865

6. Name and Address of Current Registered Agent

N. Dwayne Gray, Jr., Esq.
Greenspoon, Marder, Hirschfeld, Rafkin,
Ross & Berger, P.A.
135 W. Central Blvd., Suite 1100
Orlando, Florida 32801

7. Name and Address of New Registered Agent

Name

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

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning)

DATE

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, 2001 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

TITLE NAME Michael M. Gilardi PD ☐ Delete
STREET ADDRESS 2100 Country Club Road
CITY-ST-ZIP Sanford, Florida 32771

TITLE NAME N. Dwayne Gray, Jr. VD ☐ Delete
STREET ADDRESS 135 W. Central Blvd., Suite 1100
CITY-ST-ZIP Orlando, Florida 32801

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
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 807, 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:

N. Dwayne Gray, Jr.

7-23-01

(407) 324-1000

CR2E034 (11/00)