

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

02 APR 29 PM 11:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # H94012

1. Entity Name

**MERSUE, INC.**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**2100 Country Club Road**

Suite, Apt. #, etc.

3. Mailing Address

**Same**

Suite, Apt. #, etc.

City & State

**Sanford, Florida**

City & State

**Same**

Zip

**32771**

Country

**USA**

Zip

**Same**

Country

**Same**

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

7. Name and Address of Current Registered Agent

Name

**N. Dwayne Gray, Jr.**

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

**Greenspoon, Marder, et. al.**

**135 W. Central Blvd., Suite 1100**

City  
**Orlando**

FL

Zip Code  
**32801**

**DO NOT WRITE  
IN THIS SPACE**

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.

**400005363894--6**

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25**

**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 STREET ADDRESS CITY-ST-ZIP	<b>PD Michael M. Gilardi 2100 Country Club Road Sanford, Florida 32771</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD N. Dwayne Gray, Jr. 135 W. Central Blvd., Suite 1100 Orlando, Florida 32801</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**V.P.**

**4/26/02**

**(407) 425-6599**

Daytime Phone #

CR2E034B (12/01)



ACCOUNT NO. : 072100000032

REFERENCE : 553444 5011958

AUTHORIZATION :

COST LIMIT : \$ ~~100.00~~ 158.15

ORDER DATE : April 29, 2002

ORDER TIME : 12:0 PM

ORDER NO. : 553444-180

CUSTOMER NO: 5011958

CUSTOMER: Anne Winsor, Legal Assistant  
Greenspoon Marder Hirschfeld  
135 West Central Blvd Ste 1100  
South Trust Bank Building  
Orlando, FL 32801

ANNUAL REPORT FILING

NAME: MERSUE, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson-EXT#1155

EXAMINER'S INITIALS: \_\_\_\_\_

02 APR 29 PM 12:56

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