

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Feb 10, 2004 8:00 am
Secretary of State

02-10-2004 90006 035 ***150.00

DOCUMENT # K05177

1. Entity Name
BILLIE J. MERRITT, P.A.



Principal Place of Business
445 E. NELSON AVE.
DEFUNIAK SPGS., FL 32433 US

Mailing Address
445 E. NELSON AVE.
DEFUNIAK SPGS., FL 32433 US

3400431b



01242004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2862978

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MERRITT, BILLIE J.
445 E. NELSON AVENUE
DEFUNIAK SPRINGS, FL 32433

**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. 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
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MERRITT, BILLIE J. 445 E. NELSON AVE. DEFUNIAK SPRINGS, FL 32433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.

850-892-0852

SIGNATURE:

Billie J. Merritt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Billie J. Merritt President 2/3/04

Date

Daytime Phone #