

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morhart
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L71420 (8)

1. Corporation Name

MERRITT JEWELERS, INC.



Principal Place of Business

1335 BEVILLE RD
DAYTONA BCH FL 32119
US

Mailing Address

1335 BEVILLE RD
DAYTONA BCH FL 32119
US

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

05/07/1990

3a. Date of Last Report

04/19/1995

4. FEI Number

59-3013501

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SHAFFER, CYNTHIA
618 SHERMAN RD
S DAYTONA FL 32119

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the individual agent

Title Registered Agent Signature (Required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME SANDLAND, GEORGE W., JR.
STREET ADDRESS 203 ADAIR AVE
CITY-ST-ZIP LONGWOOD FL

TITLE PD ☐ DELETE
NAME SHAFFER, CYNTHIA
STREET ADDRESS 618 SHERMAN RD
CITY-ST-ZIP S. DAYTONA FL

TITLE V ☐ DELETE
NAME MERRITT, HILLARY
STREET ADDRESS 1920 PINE TREE TRL
CITY-ST-ZIP EDGEWATER FL

TITLE ST ☐ DELETE
NAME MERRITT, IRIS S.
STREET ADDRESS 1920 PINE TREE TRL
CITY-ST-ZIP EDGEWATER FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Hillary A. Merritt* HILLARY A. MERRITT V. 5-22-96 (904) 456-4703
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE

CR2E034 (12/95)