2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2005 08:00 AM
Secretary of State

DOCUMENT # N11252

1. Entity Name
MERCHANTS FOUR OF MARY ESTHER OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
315 EAST HOLLYWOOD BOULEVARD MARY ESTHER, FL 32569	315 EAST HOLLYWOOD BLVD SUITE 4 MARY ESTHER, FL 32569 US

03152005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2742550
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

YOUNG, JOE
315 EAST HOLLYWOOD BLVD
SUITE 4
MARY ESTHER, FL 32569

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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 _____ DATE
Signature, typed or printed name of registered agent and the date. FACTS: Registered Agent's signature required when changing

Filing Fee is $61.25
Due by May 1, 2005

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CULLEN, WILLIAM J.
STREET ADDRESS	131 WYNNHAVEN ROAD
CITY ST ZIP	MARY ESTHER, FL 32569
TITLE	D
NAME	MCCAIN, NITA
STREET ADDRESS	315 EAST HOLLYWOOD BLVD, SUITE 3
CITY ST ZIP	MARY ESTHER, FL 32569
TITLE	ST
NAME	YOUNG, JOE
STREET ADDRESS	315 EAST HOLLYWOOD BLVD, SUITE 4
CITY ST ZIP	MARY ESTHER, FL 32569
TITLE	VP
NAME	BASS, GEORGE
STREET ADDRESS	315 EAST HOLLYWOOD BLVD, SUITE 1
CITY ST ZIP	MARY ESTHER, FL 32569
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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03/18/05-80049-024 61.25

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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 617, 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: Joe Young JOE YOUNG 3-15-05 850-217-9225
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Secretary
Date Daytime Phone #