

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90144 024 ****61.25

DOCUMENT # N96000004506

1. Entity Name
MURRELL BARNES CROSSINGS OWNERS ASSOCIATION, INC



Principal Place of Business

**65 E. NASA BLVD.
SUITE 202
MELBOURNE FL 32904**

Mailing Address

**65 E. NASA BLVD.
SUITE 202
MELBOURNE FL 32904**

2. Principal Place of Business

7332 OFFICE PARK PLACE

Suite, Apt. #, etc.
STE. 101

City & State
MELBOURNE, FL

Zip Country
32940 USA

3. Mailing Address

7332 OFFICE PARK PLACE

Suite, Apt. #, etc.
STE. 101

City & State
MELBOURNE, FL

Zip Country
32940 USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3405198**

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**WILKINSON, MYLES H
65 E. NASA BLVD. 7332 OFFICE PARK PLACE
SUITE 202 STE. 101
MELBOURNE FL 32904 MELBOURNE, FL 32940**

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. 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

1/8/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **WILKINSON, MYLES H**
STREET ADDRESS **65 E. NASA BLVD., STE. 202**
CITY-ST-ZIP **MELBOURNE FL 32904**

TITLE **STD** ☐ Delete
NAME **SMITH, MARY JANE**
STREET ADDRESS **65 E. NASA BLVD., STE. 202**
CITY-ST-ZIP **MELBOURNE FL 32904**

TITLE **D** ☐ Delete
NAME **WILLIAMS, MICHAEL H**
STREET ADDRESS **65 E. NASA BLVD., STE. 202**
CITY-ST-ZIP **MELBOURNE FL 32904**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **" "** ☒ Change ☐ Addition
NAME **" "**
STREET ADDRESS **7332 OFFICE PARK PLACE, STE. 101**
CITY-ST-ZIP **MELBOURNE, FL 32940**

TITLE **" "** ☒ Change ☐ Addition
NAME **" "**
STREET ADDRESS **7332 OFFICE PARK PLACE, STE. 101**
CITY-ST-ZIP **MELBOURNE, FL 32940**

TITLE **" "** ☒ Change ☐ Addition
NAME **" "**
STREET ADDRESS **7332 OFFICE PARK PLACE, STE. 101**
CITY-ST-ZIP **MELBOURNE, FL 32940**

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

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:

SIGNATURE REQUIRED

1/8/03

321/951-1500

CR2E037 (10/02)