

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91529 037 ***150.00

DOCUMENT # *PO1000037154* ✓
1. Entity Name
Merrick Realty Enterprises, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4414 Worthington Circle
Suite, Apt. #, etc.

3. Mailing Address
4414 Worthington Circle
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Palm Harbor FL

City & State
Palm Harbor FL

4. FEI Number
59-3711767

Applied For
Not Applicable

Zip
34685 Country
USA

Zip
34685 Country
USA

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
James E. Merrick

Street Address (P.O. Box Number is Not Acceptable)
4414 Worthington Circle

City
Palm Harbor **FL** Zip Code
34685

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.

SIGNATURE _____ (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	<i>President James E. Merrick 4414 Worthington Circle Palm Harbor FL 34685</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Karen M. Merrick Director 4414 Worthington Circle Palm Harbor FL 34685</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **4/20/2002** **727 782 8155**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)