


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2003 8:00 am
Secretary of State

04-28-2003 90122 015 ***150.00

DOCUMENT # P02000031455					
1. Entity Name DAVID MERRITT CONSTRUCTION COMPANY, INC.					
Principal Place of Business 1930 RIVER OAKS RD JACKSONVILLE FL 32207			Mailing Address 1930 RIVER OAKS RD JACKSONVILLE FL 32207		
2. Principal Place of Business			3. Mailing Address PO Box 51526		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State Jax Bch Fla		
Zip	Country	Zip	Country	4. FEI Number 043620130	
32240-1526	USA	32240-1526	USA	Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MERRITT, MELISSA 1930 RIVER OAKS RD JACKSONVILLE FL 32207			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing— Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
	President	David Merritt	2419 Blackbeard Jax Fla 32224	TITLE	NAME
	V.P. / Sec.	Melissa Merritt	108 Florida Bldg Neptune Bch Fla 32266		
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.					
SIGNATURE: Melissa Merritt				Date: 1-8-03	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #: 904-993-1697	

CR2E034 (10/02)