

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000050042

FILED
May 08, 2007
Secretary of State

Entity Name: MERMAID MAINTENANCE SERVICES INC

Current Principal Place of Business:

0190 BALS A WAY
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

10190 BALS A WAY
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

4521 PGA BLVD.
BOX #291
PALM BEACH GARDENS, FL 334108

New Mailing Address:

4521 PGA BLVD.
BOX #291
PALM BEACH GARDENS, FL 33418

FEI Number: 02-0613575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, RICHARD A
10190 BALS A WAY
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMPSON, RICHARD
Address: 10190 BALS A WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: V () Delete
Name: THOMPSON, DEBORAH B
Address: 10190 BALS A WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: ST () Delete
Name: LOCKHART, JAMES G
Address: 461 VENUS DR.
City-St-Zip: JUNO BEACH, FL 33408

Title: D () Delete
Name: LAVELLA, MICHAEL
Address: 11 UNO LAGO DR
City-St-Zip: JUNO BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD THOMPSON

P

05/08/2007

Electronic Signature of Signing Officer or Director

Date