


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT.

**FILED**  
**May 02, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P02000099804		
1. Entity Name MEYCOR, INC.		
Principal Place of Business 2502 LAKE DEBRA DRIVE 7203 ORLANDO, FL 32835	Mailing Address P.O. BOX 796 WINDERMERE, FL 34786	



05012008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 42-1551940	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

MEYER, RUSSELL W  
2502 LAKE DEBRA DRIVE  
#7203  
ORLANDO, FL 32835

**DO NOT WRITE  
IN THIS SPACE**

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, 2008 Fee will be \$550.00**

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

U000000942577

05/29/08-80025-005-150.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS MEYER, RUSSELL W 2502 LAKE DEBRA DRIVE #7203 ORLANDO, FL 32835
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT MEYER, ANITA L 2502 LAKE DEBRA DRIVE #7203 ORLANDO, FL 32835
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Russell W. Meyer*  
RUSSELL W. MEYER

4/30/08

Date

407-353-4741

Daytime Phone #