


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000109260	
1. Entity Name MERRICK SERVICES, INC.	

Principal Place of Business 103 ORANGE AVE EDGEWATER, FL 32132 US	Mailing Address 103 ORANGE AVE EDGEWATER, FL 32132 US
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DO NOT WRITE IN THIS SPACE



03062006 No Chg-P CR2E034 (11/05)

4. FEI Number 05-0536995	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

LOGUIDICE, JOSEPH A
555 W. GRANADA BLVD STE B-5
ORMOND BEACH, FL 32174

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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 the fee applicable. (NOTE: Registered Agent signature required when reappointing)) **DATE** _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MERRICK, DAVID R
STREET ADDRESS	3559 BARNA AVE
CITY-ST-ZIP	TITUSVILLE, FL 32780
TITLE	D
NAME	MERRICK, JAMES W
STREET ADDRESS	209 FLAMINGO RD
CITY-ST-ZIP	OAK HILL, FL 32759
TITLE	D
NAME	MERRICK, PEARLINE W
STREET ADDRESS	209 FLAMINGO RD
CITY-ST-ZIP	OAK HILL, FL 32759
TITLE	D
NAME	BROWN, ANGELA
STREET ADDRESS	506 WILLIAM WAY
CITY-ST-ZIP	PANAMA CITY, FL 32404
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/21/06 80012 024 150.00

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 James W. Merrick **James W. Merrick** **03/06/2006** **(386)473-1818**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #