

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 15, 2005 8:00 am
Secretary of State

02-15-2005 90024 010 ***158.75

DOCUMENT # P02000126370

1. Entity Name

RAYMOND J. MAYERNIK, INC.



Principal Place of Business

1645 DUNLAWTON AVE
3012
PORT ORANGE FL 32127-8968

Mailing Address

1645 DUNLAWTON AVE
3012
PORT ORANGE FL 32127-8968

2. Principal Place of Business

4670 LINKS VILLAGE DR

3. Mailing Address

4670 LINKS VILLAGE DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

UNIT D-201

UNIT D-201

City & State

City & State

PORT ORANGE, FL

PORT ORANGE, FL

Zip

Country

Zip

Country

32127-3032

USA

32127-3032

USA



1st MOORE

CR2E034 (10/04)

4. FEI Number

90-0055012

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MAYERNIK, RAYMOND J
1645 DUNLAWTON AVE
APT 3012
PORT ORANGE FL 32127-8968

7. Name and Address of New Registered Agent

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

Raymond J. Mayernik
Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEB 08, 2005

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME MAYERNIK, RAYMOND J
STREET ADDRESS 1645 DUNLAWTON AVE APT 3012
CITY-ST-ZIP PORT ORANGE FL 32127-8968

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Raymond J. Mayernik
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 08, 2005

Date

407 466-3610

Daytime Phone #