

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000071095

1. Entity Name
MERE REAL ESTATE COMPANY, INC.



Principal Place of Business
**3300 S HIAWASSEE ROAD
SUITE 106
ORLANDO, FL 32835**

Mailing Address
**3300 S HIAWASSEE ROAD
SUITE 106
ORLANDO, FL 32835**



04212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0059588

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BALLINGER, DAVID A
1821 BAILLIE GLASS LANE
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

David A. Ballinger

(NOTE: Registered Agent signature required when reinstating)

DATE

4/21/08

**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**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D/P
BALLINGER, DAVID A
3300 S HIAWASSEE ROAD SUITE 106
ORLANDO, FL 32835**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D/V/P
FOLAND, DALE L
3300 S HIAWASSEE ROAD SUITE 106
ORLANDO, FL 32835**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D/ST
GRAY, KEVIN E
3300 S HIAWASSEE ROAD SUITE 106
ORLANDO, FL 32835**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
SIBIGA, STEPHEN P
3300 S HIAWASSEE ROAD SUITE 106
ORLANDO, FL 32835**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000916496
05/13/08-80003-017 150.00

**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

David A. Ballinger **DAVIDA BALLINGER** 4/21/08 407-295-9565

Date

Daytime Phone #