2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000093079

Entity Name: MERLIN RAMCO, INC

FILED Apr 06, 2009 Secretary of State

	MOT WILKENY	10 MICO, 1140.				
Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
	ARLAND DR. IVILLE, FL 322	256	SUITE 802	9191 R.G. SKINNER PKWY. SUITE 802 JACKSONVILLE, FL 32256		
Current N	lailing Addres	ss:	New Maili	New Mailing Address:		
	ARLAND DR. IVILLE, FL 322	256				
FEI Number	: 20-5208340	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired (X)	
Name and	l Address of (Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
	ROBERT A ARLAND DRIV IVILLE, FL 322		9208 SÚG	MILLER, ROBERT A JR. 9208 SUGARLAND DRIVE JACKSONVILLE, FL 32256 US		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing i	its registered	office or registered agent, or both,	
SIGNATUI	RE: ROBERT	A. MILLER JR.		04/06/2009		
	Electron	nic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PSCH (MILLER, ROBE 9208 SUGARL JACKSONVILL	AND DR	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	TVPB (MILLER, ELAIN 9208 SUGARL JACKSONVILL	AND DRIVE	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	V/D (MILLER, ROBE 3605 JOHN SIF FREDERICK, M	MMONS CT	Title: Name: Address: City-St-Zip:	V/D (MILLER, ROI 579 SADDLE ST. JOHNS, F	STONE DR.	
Title: Name: Address: City-St-Zip:	D (MILLER, EDW. 10712 ROGAL CHARLOTTE, N	_A DR	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	V/D (RADUENZ, B 10843 CABE SAN DIEGO,	LA DR.	

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: ROBERT A. MILLER JR. V/D 04/06/2009