## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P93000076943

MERRELL MORTGAGE CORPORATION

**FILED** May 03, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE **Katherine Harris** 05-03-1999 90099 007 \*\*\*150.00



Principal Plac	e of Business	Mailing Address				
9600 KOGER B	OULEVARD	9800 KOGER BOULEVARD				
SUITE 200		SUITE 200		DO NOT WRITE IN T	HIS SPACE	
•		ST PETERSBURG FL 33702 US		3. Date Incorporated or Qualifed		
03	•	00		11/01/1993		
2 Principal P	lace of Business	2a. Mailing Address /		4. FEI Number	TA	pplied For
21 801 834 AVENUE N.		26 801 83 - AVENUE W.		59-3208779	<u> </u>	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		_	\$8.75	Additional
22 119	.,	27 119		5. Certifcate of Status Desired	Fee R	equired
City & State		City & States		6. Election Campaign Financing \$5.00 May Be		May Be
23 ST. PETERSBURG FL		28 ST. PETERSBURG FL		Trust Fund Contribution Added to Fees		
zip 24 337	Cogntry		Country FINELLAS	8. This corporation owes the current year	r Intangible ☐ Yes	□No
24 <i>33 /</i>	V2 25 TINELLAS	<del></del>	1/1/212/3	Personal Property Tax.  10. Name and Address of New Registe		
· <del></del>	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registe	red Agent	
RIT	LER, RICHARD C					
	) KOGER BOULEVARD SUITE 200	•	82 Street Addr	ess (P.O. Boy Number is Not Acceptable)	1/	
	TE 119	•	83	BS- HVENUE	<u> </u>	
+	PETERSBURG FL 33702		03			
01 1	ETEROBORG TE 00702		84 City		85 Zip	Code
	·			had be a second of the second		o rosistorod
11. Pursuant office or i	to the provisions of Sections 607.0502 registered agent, or both, in the State o	and 607.1508, Florida Statutes, the Florida. Such change was author	e above-named corporation	oration submits this statement for the purpos on's board of directors. I hereby accept the a	pointment as r	egistered
agent. I a	ım familiar with, and accept the obligati	ons of, Section 607.0505, Florida S	Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Regist	tered Agent signature required	d when reinstating) DATI		
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		ORS IN 12
TITLE	D	☐ DELETE 1	.1 TITLE		☐ Change	☐ Addition
NAME	BUTLER, RICHARD C	ı ı	2 NAME	•		
STREET ADDRESS	AND AND AND ALLER ME HAND	1	.3 STREET ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL	1	.4 CITY-ST-ZIP			
TITLE		☐ DELETE 2	11 TITLE		Change	Addition
NAME	1	2	2 NAME			
STREET ADDRESS		2	.3 STREET ADDRESS			!
CITY-ST-ZIP		2	4 CITY-ST-ZiP			
TITLE			I.1 TITLE		Change	Addition
NAME	1	I 3	1.2 NAME			
STREET ADDRESS		3	.3 STREET ADDRESS	•		
CITY-ST-ZIP	·		4. CITY-ST-ZIP			
TITLE			i,1 TITLE		Change	Addition
NAME	J		2 NAME		- ·	
		I .	3 STREET ADDRESS			
STREET ADDRESS	1		1			
CITY-ST-ZIP			i.4 CITY-ST-ZIP		☐ Change	Addition
TITLE			i.2 NAME			
NAME	1		3.3 STREET ADDRESS			
STREET ADORESS			6.4 CITY-ST-ZIP			
CITY-ST-ZIP			6.1 TITLE	<u> </u>	☐ Change	☐ Addition
TITLE	1					
NAMÉ						
		_ 5222.14   6	5.2 NAME		□ Ouruido	
STREET ADDRESS					Onlings	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: