2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 03, 2008 08:00 A tate

ANITOAL ILLI OKI					Sagratary of St		
DOCUMENT # P93000078445 1. Entity Name MERRILL BEACH CO., INC.		45				Secretary of St	
1940 SEVILLE DR. 19		lailing Address 1940 SEVILLE DR. PENSACOLA, FL 32503			1 1 1 1 1 1 1 1 1 1		
DO NOT WRITE IN THIS SPA			CE	02242008 4. FEI Numb 59-321	4. FEI Number Applied For 59-3210434 Not Applicable 5. Certificate of Status Desired \$8.75 Additional		
	6. Name and Address of Current Re	alatavad Amaut	·			Fee Required	
MERRILL, W C JR. 1940 SEVILLE DR. PENSACOLA, FL 32503			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 Signature, typed or privided name of registered agent and bitle if applicable (NOTE. Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing \$5 Trust Fund Contribution. Add				
TITLE DP MERRILL, W C JR. STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL TITLE DST MERRILL, W.C. III STREET ADDRESS P O BOX 710 PENSACOLA, FL 32591 TITLE DVP MAME MERRILL, B.H. STREET ADDRESS P O BOX 710 PENSACOLA, FL 32591 TITLE DVP MAME MERRILL, B.H. STREET ADDRESS P O BOX 710 PENSACOLA, FL 32591 TITLE DVP MAME MERRILL, B.H. STREET ADDRESS P O BOX 710 PENSACOLA, FL 32591 TITLE DVP MAME MERRILL, J.C. STREET ADDRESS P O BOX 710 PENSACOLA, FL 32591				_	U0000 03/18/08 NOT W THIS SF		
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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 en powered.

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: W. C. Merrill, Jr. C SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (850) 434-1001