

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90088 008 ***150.00

DOCUMENT # P95000062186

1. Entity Name
MERDIC, INC.



Principal Place of Business
4800 NORTH PALAFOX ST.
PENSACOLA, FL 32505

Mailing Address
P.O. BOX 6038
PENSACOLA, FL 32503

50011043



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01182005 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
59-3338277

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DICKERSON, WILLIAM
1405 N BAYLEN ST
PENSACOLA, FL 32501

Name

Street Address (P.O. Box Number is Not Acceptable)

120 Seamarge Circle

City Pensacola

FL

Zip Code 32507

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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
MERRILL, BURNEY H
P.O. BOX 710
PENSACOLA, FL 32591 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
DICKERSON, WILLIAM
1405 N BAYLEN ST
PENSACOLA, FL 32501 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition
120 Seamarge Circle
Pensacola, FL 32507

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
DICKERSON, JAMES H
2830 BELLE CHRISTIAN CIRCLE
PENSACOLA, FL 32503 ☐ Delete

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

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

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 persons empowered.

SIGNATURE:

W.C. Merrill, Jr.
W.C. MERRILL, JR.

Date

Daytime Phone #

2/3/05 (850) 434-1001