

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P96000098009**

1. Entity Name

MAERD, INC.**FILED**
Aug 21, 2000 8:00 am
Secretary of State

08-21-2000 90208 011 ***150.00

Principal Place of Business

Mailing Address

SOUTH ATLANTIC AVENUE
BEACH SHORES FL 32118**2407 SOUTH ATLANTIC AVENUE**
DAYTONA BEACH SHORES FL 32118-5401

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3416698

Applied For

Not Applicable

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

HARRISON, GEORGE F
2407 SOUTH ATLANTIC AVENUE
DAYTONA BEACH SHORES FL 32118

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be**
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **HARRISON, GEORGE F**
STREET ADDRESS **2407 SOUTH ATLANTIC AVENUE**
CITY-ST-ZIP **DAYTONA BEACH SHORES FL**TITLE **VP** ☐ Change ☒ Addition
NAME **HARRISON, GEORGE F IV**
STREET ADDRESS **2407 S. ATLANTIC Ave**
CITY-ST-ZIP **DAYTONA Beach Shores FL**TITLE **VPTS** ☒ Delete
NAME **HARRISON, LAURA L**
STREET ADDRESS **2407 S ATLANTIC AVE**
CITY-ST-ZIP **DAYTONA BEACH SHORES FL**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

George F. Harrison
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

904 258 7614

CR2E034 (9/99)

Attachment
P96000098009
A0073535

To Whom it May Concern.

I would like to ask if there is any way possible that the late fee could be waived on this renewal. Since last year I've been going through a divorce I never took care of the paper work until now. My accountant asked me to write you explaining my circumstances. She is no longer involved with the motel, but didn't take care of this filing while she was here. I'm sorry for being so late but I just found out about this.

Thank You
Georgia Harner