

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90042 050 ***158.75

DOCUMENT # P96000098009 1. Entity Name MAERD, INC.					
Principal Place of Business 2407 SOUTH ATLANTIC AVENUE DAYTONA BEACH SHORES, FL 32118			Mailing Address 2407 SOUTH ATLANTIC AVENUE DAYTONA BEACH SHORES, FL 32118		
2. Principal Place of Business 3 CHESTNUT CT.		3. Mailing Address 3 CHESTNUT CT.		% F 5 2 , , , , 5 4 , , 5 F &	
Suite, Apt. #, etc. PALM COAST, FL		Suite, Apt. #, etc. PALM COAST, FL		02052004 Chg-P CR2E034 (10/03)	
City & State 32137 FLAGLER		City & State 32137 FLAGLER		4. FEI Number 59-3416698	
Zip 32137		Country FL		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HARRISON, GEORGE F 2407 SOUTH ATLANTIC AVENUE DAYTONA BEACH SHORES, FL 32118			7. Name and Address of New Registered Agent Name HARRISON, GEORGE F Street Address (P.O. Box Number is Not Acceptable) 3 CHESTNUT CT City PALM COAST FL Zip Code 32137		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	P HARRISON, GEORGE F 2407 SOUTH ATLANTIC AVENUE DAYTONA BEACH SHORES, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HARRISON, GEORGE F 3 CHESTNUT CT PALM COAST, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HARRISON, GEORGE 2407 S ATLANTIC AVE DAYTONA BCH, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HARRISON, GEORGE 3 CHESTNUT CT PALM COAST, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STANARD, STEPHANY 3 CHESTNUT CT PALM COAST, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 like empowered.					
SIGNATURE: <u>George F Harrison</u>			2/5/04 386 4464191		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		