## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P97000003105**

1. Entity Name

M.E.M. OF MARTIN COUNTY FLORIDA, INC.



FILED Jan 22, 2008 08:00 AM Secretary of State

Principal Place of Business

177 4TH AVE N, 2ND FLOOR JACKSONVILLE BEACH, FL 32250 Mailing Address

177 4TH AVE N, 2ND FLOOR JACKSONVILLE BEACH, FL 32250



DO NOT WRITE IN THIS SPACE

01092008 No Chg-P CR2E034 (11/05)

4. FEI Number	 	Applied For
65-0734862		Not Applicable
5. Certificate of Status Desired	\$8.75	Additional

6. Name and Address of Current Registered Agent

SCHMITZER, EDWARD P SMOAK DAVIS & NIXON LLP 1514 NIRA ST. JACKSONVILLE, FL 32204

STREET ADDRESS CITY-ST-ZIP

## DO NOT WRITE IN THIS SPACE

JACKSONVILLE, FL 32204			IN THIS STASE			
	named entity submits this statement for the plons of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	ith, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and title of	l applicable (NOTE: Registered	Agent signature	e required when reinstating)	DATE	
FIL After Ma	E NOWI!! FEE IS \$150.00 by 1, 2008 Fee will be \$550.00	Election Campaign Finan- Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
NAME STREET ADDRESS CITY-ST-ZIP	JOHNSON, JENNIFER 177 4TH AVE N, 2ND FLOOR JACKSONVILLE BEACH, FL 32250				U00000790598	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		i		. •	01/23/08-80041-004 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		:				
TITLE NAME						

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 suppliemental report is frue 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 of 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 attackment with an address, with all place we appropried.

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