

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000021113 (0)

1. Corporation Name
MERRITT SPEECH & LEARNING, INC.

Principal Place of Business
2787 SEBASTIAN COURT
JACKSONVILLE FL 32224

Mailing Address
2787 SEBASTIAN COURT
JACKSONVILLE FL 32224



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 9951 ATLANTIC BLVD		26		03/07/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 SUITE 171		27		59-2432010	
City & State		City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23 JACKSONVILLE FL		28		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Zip		Zip		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	
24 32224		29		30	
Country		Country			
25 USA		30			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CHARLES DANIEL SIKES PA 407 W GEORGIA ST STARKE FL 32091				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL 85 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE				1.1 TITLE			
NAME				1.2 NAME			
STREET ADDRESS				1.3 STREET ADDRESS			
CITY-ST-ZIP				1.4 CITY-ST-ZIP			
2.1 TITLE				2.2 NAME			
2.3 STREET ADDRESS				2.4 CITY-ST-ZIP			
3.1 TITLE				3.2 NAME			
3.3 STREET ADDRESS				3.4 CITY-ST-ZIP			
4.1 TITLE				4.2 NAME			
4.3 STREET ADDRESS				4.4 CITY-ST-ZIP			
5.1 TITLE				5.2 NAME			
5.3 STREET ADDRESS				5.4 CITY-ST-ZIP			
6.1 TITLE				6.2 NAME			
6.3 STREET ADDRESS				6.4 CITY-ST-ZIP			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, with an appointment to an address.

SIGNATURE

Richard B Merritt
Richard B Merritt

4-4-98

904-223-6449

CR2E034 (10/97)