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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000098675 (6)

MERRITT ISLAND LAND TRUST, INC.

FILED May 14 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address			
7 MORTH CO	OCOA BOULEVARD	7 NORTH COCOA BOULEVAR	an		
COCOA FL 3		COCOA FL 32922	10	DO NOT WOUTE IN THIS COLOR	
				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
2. Principal P	Place of Business	2a. Mailing Address		1/19/1997 4. FEI Number Applied For	
<u> </u>	High Point Dr.		Point Dr.	59-3480277 Not Applica	
Sulte, Apt.	#, etc	Suite, Apl. #, etc.	NOIN DI	\$8.75 Additions	
22		27		5. Certificate of Status Desired Fee Required	1
City & Stat	(e)	City & State		6. Election Campaign Financing \$5.00 May Be	
23 Co	con th	28 60000-	FL	Trust Fund Contribution Added to Fees	
Zip	Country	7p	Country	8. This corporation owes or has paid the current year Intangible	1
24 379	7 2 6 25	29 3 29 26 30		Personal Property Tax due June 30. Yes No	
	g. Name and Address of Current	Hegistered Agent	B1 Name	10. Name and Address of New Registered Agent	
	INDIN, GLENN T		J. Ivanie		
	5 SOUTH PLUMOSA STREET		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
ME	RRITT ISLAND FL 32952		83		
					1
			84 City	FL 85 Zip Code	
44 Purcuant	to the provisions of Sachans 607 0502	and 607 1508 Florida Statutae 1	ha above named core	poration submits this statement for the purpose of changing its register	ba:
office or r	registered agent, or both, in the State of	f Florida Such change was auth	orized by the corporat	stion's board of directors. I hereby accept the appointment as registere	ď
	am familiar with, and accept the obligati	ions of, Section 607.0505, Florida	a Statutes.		
SIGNATURE	Signature, typed or pointed name of respictored ascent	and to'v if applicable (NOTE Rei	gistored Agent signature requir	red when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	7
TITLE	D	☐ DELETE	1.1 TITLE D1	rector President Change Addi	lion
NAME	SHAH, MAHESH R		1.2 NAME		
STREET ADDRESS	7-NORTH-COCOA BOULEVARE)	1.3 STREET ADDRESS 46	72 HIGH POINT BR	1
CITY-ST-ZIP	COCOA FL 32922		1.4 CITY-\$1-ZIP C	OCOM PL 32926	
TITLE		☐ DELETE	2.1 TITLE	Change Addi	tion
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		<u>`</u>	2. 4 CITY - ST - ZIP		
TITLE .		☐ DELETE	3.1 TITLE	Change Addi	tion
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CITY-ST-ZIP		☐ DELETE	3 4. CiTY-ST-ZiP	Change Addi	lion
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NAME PROCET ADDRESS			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	☐ Change ☐ Addi	tion
NAME		L. J ORCER	5.2 NAME	C country	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		ļ	5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TiTLE	Change Addi	tion
NAME	1		6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		}
	İ		SIG STITES CANDILLOU		
CITY-ST-ZIP			6.4 City-St-ZiP		

4. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes, 1 further certify that the information indicated on this annual report or supplemental annual report is five 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, or you an attachment with an address.

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1.29-98

407-631-0245