2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 07, 2000 8:00 am
Secretary of State
04-18-2000 90192 034 ****61.50
06-08-2000 90003 041 ****88.50

DOCUMENT # P98000049057

1. Entity Name
M.M.S. OF THE TREASURE COAST

Principal Place of Business
M. M. S. OF THE TREASURE COAST
901 MARTIN DOWNS BLVD
PALM CITY, FL. 34990

Mailing Address
1134 NE COY SENDA
JENSEN BEACH, FL. 34957

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip
Country

3. Mailing Address
Suite, Apt. #, etc.
City & State: JENSEN BEACH, FL
Zip: 34957
Country: U.S.A.

4. FEI Number: 65-0856515 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
MERLO, VICTOR
1134 NE COY SENDA
JENSEN BEACH, FL 34957

7. Name and Address of New Registered Agent
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: Victor M. Merlo 4/3/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to: Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	THIS CORPORATION IS A [redacted] FORMED SOLELY FOR THE PUR- OUR BOAT. THERE ARE NO OFFICER	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FAMILY AFFAIR AND WAS [redacted] POSE OF OBTAINING INSURANCE FOR S. AND, IT CONSISTS OF FOUR
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEMBERS. THE NAMES AND [redacted] BELOW.	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ADARESSES ARE SHOWN [redacted]
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JOSEPH MC CLOSKEY [redacted] 3150 S.W. SUNSET TRACE CIRCLE PALM CITY, FL. 34990	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CHRISTOPHER SHERER [redacted] 630 E. OCEAN BLVD. STUART, FL. 34994
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	HARRY SHERER [redacted] 3040 LAKE SHORE DR. APT. 201 RIVIERA BEACH, FL. 33404	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICTOR M. MERLO [redacted] 1134 NE. COY SENDA JENSEN BEACH, FL. 34957
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E037 (8/99)

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 617, 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: VICTOR M. MERLO Victor M. Merlo 4/3/00 561-225-4915
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #