2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000077823

Entity Name: MERRYWOOD, INC

Address:

City-St-Zip:

34 ARLINGTON STREET

WINCHESTER, MA 01890

FILED May 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 251 ALTATMONE COMMERCE BLVD. **SUITE 1420** ALTAMONTE SPRINGS, FL 32714 **New Mailing Address: Current Mailing Address:** 251 ALTATMONE COMMERCE BLVD. **SUITE 1420** ALTAMONTE SPRINGS, FL 32714 FEI Number: 59-3593694 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMALL, KEVIN 9743 TÁTTERSALL AVENUE ORLANDO, FL 32817 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: KEVIN SMALL Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SMALL, KEVIN Name: Name: 9743 TATTERSALL AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32817 City-St-Zip: () Delete Title: VAS Title: () Change () Addition Name: SMALL, YVONNE Name: 9743 TATTERSALL AVENUE Address: Address: ORLANDO, FL 32817 City-St-Zip: City-St-Zip: Title: Title: VSD () Delete () Change () Addition HINTLIAN, EDWARD Name: Name: 75 THORNBERRY ROAD Address: Address: City-St-Zip: WINCHESTER, MA 01890 City-St-Zip: Title: VTD () Delete Title: () Change () Addition BOHLIN, GAREN Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: KEVIN SMALL PD 05/05/2006