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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 18 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

V59425

(1)

MERRILL ROAD, INC.

MIP!	L HOAD, INO				1 1831) (1118)   1118   1118   1118   1119	H BIBLI BIBLI BIBLI BIBLI BIBLI BIBLI BIBLI
Principal Place	e of Business	Mailing Address				
BOI1 MERRILL RD JACKSONVILLE FL 32211 US		8011 MERRILL RD JACKSONVILLE FL 32277-3718 US				
					3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal P	lace of Business	2a. Mailing Address			<b>08/24/1992 4.</b> FEI Number	02/20/1996 Applied For
21	acco of Chapmers	26				Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		_ <del></del>	59-3140078	\$9.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State	CI CI	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	<u>-</u>		Trust Fund Contribution	Added to Fees
Zip 32277-			Country	/ 		Yes No
	9. Name and Address of Current	Registered Agent		т	10. Name and Address of New Re	egistered Agent
SMI	TH, CHRIS		81	Name		
7223 STATE ROAD 52			82	Street A	ddress (P.O. Box Number is Not Accepta	ble)
SUI	TE 1		83			
HUC	OSON FL 34667		"	<u> </u>		
			84	City		FL 85 Zip Code
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with land accept the obligati	Florida, Such change was aut	horizad h	v the corno	orporation submits this statement for the oration's board of directors. I hereby acce	purpose of changing its registered
SIGNATURE	Signature, typed or printed name of registered agent	and trie if annicable (NOTF : F	Ranistered An	ent sidnature re	guired when reinstating)	DATE
12.	OFFICERS AND		13.	on organization	ADDITIONS/CHANGES TO OFFI	
TITLE	PSD	DELETE	1.1 TITLE			Change Addition
NAME	SMITH, CHRIS		1.2 NAME	j		
STREET ADORESS	7223 S.R. 52, STE. 1		1.3 STAEE	r address		
City-St-Zip	HUDSON FL		1.4 CITY-	ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
THILE			2.1 TITLE		•	Change
NAME	SMITH, CHRIS		2.2 NAME			
STREET ADDRESS	7223 S.R. 52, STE. 1			T ADORESS		
CITY - ST - ZIP TITLE	HUOSON FL.	DELETE	2.4 CITY- 3.1 TITLE	SI-ZIP		Change Addition
NAME	על —		3.2 NAME			Onlings //datest
STREET ADDRESS	PRILLIPS, JEFF			ADDRESS		
CITY - ST - ZIP	7223 S.R. 52, STE. 1		34. CiTY-			,
TITLE	HUDSON FL	☐ DELETE	41 TITLE	V		Change Addition
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS	•	
CITY-ST-ZIP			4.4 CITY+	ST-ZIP		
TIT.E		DELETE	5.1 TIFLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-S1-7-P			5.4 CITY -	ST - ZIP		·
TITLE	_	☐ DELETE	6.1 TITLE			Change Addition
NAME	·		6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		

14. I do 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, or on an attachment with an address.

02/13/1997

904-743-9100