


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2008 08:00 A
Secretary of State

DOCUMENT # V59942 1. Entity Name F. J. V. MERGE, INC.	
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Principal Place of Business 600 N. 14TH STREET QUINCY, FL 32351	Mailing Address 2111 WEST JEFFERSON STREET QUINCY, FL 32351
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DO NOT WRITE IN THIS SPACE



01082008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3141967	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HINSON, ALEXANDER L 121 N. MADISON STREET QUINCY, FL 32351

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000889448 04/22/08-80051-023 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D VICKERS, DON 102 S.E. 1ST STREET HAVANA, FL 32333
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D JOHNSON, GEORGE E 2111 W JEFFERSON ST QUINCY, FL 32351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD FLETCHER, SANDRA S 600 N. 14TH STREET QUINCY, FL 32351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>George E. Johnson Vice President</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date <u>4-3-08</u>	Daytime Phone # <u>850.627-9201</u>
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