Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90026 037 ***158.75

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 176698

1. Corporation Name

MILLER ELECTRIC COMPANY

Principal Place of Business Mailing Address						1				
2251 ROSSELLI	MRS JANE M WYNN				1					
JACKSONVILLE	FL 32204	P. O. BOX 1799				ł	DO NOT V	VRITE IN THIS	SPACE	
US		Jacksonville FL 32201 US			<u> </u>	3. Date Incorporated or Quali				
	•	50				1	12/29/1953			
2 Drianing O	ace of Business	2a. Mailing Address				+	4. FEI Number			pplied For
·	ace or business	- <u> </u>	<u> </u>				59-0361850			ot Applicable
Suite, Apt.	# etc		26 SUSAN A. WALDEN Suite, Apt. #, etc.							Additional
	m, 610.					ļ	5. Certificate of Status Desire	q 🔼		equired
City & State	<u> </u>		27 P O BOX 1799 City & State				6. Election Campaign Finance	ing.	\$5.00	May Be
	5	<u> </u>	28 JACKSONVILLE FL			1	Trust Fund Contribution	.		to Fees
Zip	Country	Zip		ountry			8. This corporation owes the	current year Int	angible	
24	25	29 32201		DUV	ΔТ.	l l	Personal Property Tax.	ounding your mi	Yes	□No
24)	9. Name and Address of Curi		100/	<u> </u>	.311	1	10. Name and Address of Ne	w Registered	Agent	
 -				81	Name					
WYNN,JANE M				20	014.1	A d d = = = =	SUSAN A. WAL			
2251	ROSSELLE ST		82 Street A			Adoreșs	(P.O. Box Number is Not Acc 2251 ROSSELI		n	Ì
JACI	KSONVILLE FL 32201			83			ZZJ I KODDEĐI			
				84	City	JACI	KSONVILLE	FL	85 Zip	Code 204
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t					ye named corporation submits this statement to			the purpose of	changing it	s registered
nffice or n	enistered agent, or both, in the Sta	ite of Florida. Such change was a	utnoriz	zea ov	tne corpo	oration's	board of directors. I hereby a	ccept the appo	intment as r	egistered
agent. I a	m familiar with, and accept the obl	igations of Section 607.0505 FIG	nda S	tatutes.	-1.	,		1/6/00		
SIGNATURE	SUSAN A. WALDEN	Susan a	. Co	CALL Agen	LU	required who	en reinstating)	1/6/99		
12.		AND DIRECTORS		3.	T degristation of the	oquipa iiii	ADDITIONS/CHANGES TO	OFFICERS A	ND DIRECT	ORS IN 12
TITLE	VP	☐ DELETE		1 TITLE					Change	
NAME	WITT, E. E		13	2 NAME						
STREET ADDRESS	2251 ROSSELLE ST.		1		ADDRESS	1				- 1
	JACKSONVILLE FL			4 CITY-57						ļ
CITY-ST-ZIP TITLE	EVS	☐ DELETE	_	† TITLE	1-21				Change	[] Addition
i	WYNN, JANE M			2 NAME	ļ	ļ				_ [
NAME	2251 ROSSELLE ST				ADDRESS	İ				
STREET ADDRESS	JÁCKSONVILLE FL		- "[. [ļ	· ·	.	•	-
CITY-ST-ZIP	AST	☐ DELETE		4 CITY-S 1 TITLE	1-ZIP	SECT	RETARY-TREASURER		[v] Change	Addition
TITLE	· · · · ·				-	Sher	ATMOCERATE INSTERN		~ a.	
NAME	WALDEN, SUSAN A 2251 ROSSELLE ST		- 1	2 NAME		1				
STREET ADDRESS			- 1		ADDRESS	1				}
CITY-ST-ZIP	JACKSONVILLE FL	☐ DELETE		4. CITY-S	T-ZIP				Change	Addition
TITLE	P AUTOEV HE	□ bece≀e		† TITLE]
NAME .	AUTREY, H.E.			2 NAME		ļ				ļ
STREET ADDRESS	2251 ROSSELLE ST				ADDRESS					
CITY-ST-ZIP	JACKSONVILLE FL	——————————————————————————————————————	_	4 CITY-ST	r-ZIP	<u> </u>			Change	Addition
TITLE	V	☐ DELETE		1 TITLE			,		L.J Change	
NAME	NELSON, JR. E H			2 NAME						
STREET ADDRESS	2251 ROSELLE ST				ADDRESS					
CITY-ST-ZIP	JACKSONVILLE FL			4 CITY-ST			141 141 4 111 8.		Change	☐ Addition
TITLE	TD	☐ DELETE	- 8	† TITLE	, ii,	iggi.	ill main		□ ∠nange	
NAME	AUTREY, R. A.		- 1	2 NAME						{
CTOSET ADDDESS	2251 BOSELLE ST		■ 6.	3 STREET	ADDRESS	1				

14. 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 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, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

JACKSONVILLE FL

SIGNATURE: SUSAN AS WALDEN