

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 176698

1. Entity Name

MILLER ELECTRIC COMPANY

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90022 006 ***158.75

Principal Place of Business
2251 ROSSELLE STREET
JACKSONVILLE FL 32204
US

Mailing Address
SUSAN A. WALDEN
P. O. BOX 1799
JACKSONVILLE FL 32201-1799
US

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-0361850

Applied For

Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WALDEN, SUSAN A
2251 ROSSELLE ST
JACKSONVILLE FL 32204

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE VP
NAME WITT, E. E
STREET ADDRESS 2251 ROSSELLE ST.
CITY-ST-ZIP JACKSONVILLE FL ☐ Delete

TITLE EVS
NAME WYNN, JANE M
STREET ADDRESS 2251 ROSSELLE ST
CITY-ST-ZIP JACKSONVILLE FL ☒ Delete

TITLE ST
NAME WALDEN, SUSAN A
STREET ADDRESS 2251 ROSSELLE ST
CITY-ST-ZIP JACKSONVILLE FL ☐ Delete

TITLE P
NAME AUTREY, H.E.
STREET ADDRESS 2251 ROSSELLE ST
CITY-ST-ZIP JACKSONVILLE FL ☐ Delete

TITLE V
NAME NELSON, JR. E H
STREET ADDRESS 2251 ROSELLE ST
CITY-ST-ZIP JACKSONVILLE FL ☐ Delete

TITLE TD
NAME AUTREY, R. A.
STREET ADDRESS 2251 ROSELLE ST
CITY-ST-ZIP JACKSONVILLE FL ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Susan A. Walden
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SUSAN A. WALDEN, SEC-TREAS

1/7/2000

Date

Daytime Phone #