


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 14, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # N97000001076**  
 1. Entity Name  
**BEVERLY AND MARVIN MILLER FOUNDATION, INC.**



Principal Place of Business      Mailing Address  
**17153 ERICA ROSE COURT**      **17153 ERICA ROSE COURT**  
**BOCA RATON, FL 33496**      **BOCA RATON, FL 33496**

**DO NOT WRITE IN THIS SPACE**



04062004 No Chg-NP CR2E037 (10/03)

4. FEI Number      Applied For  
**65-0733649**      Not Applicable

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

6. Name and Address of Current Registered Agent  
**MILLER, MARVIN**  
**17153 N.W. ERICAROSE COURT**  
**BOCA RATON, FL 33496**

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$61.25**  
**Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution.       **\$5.00** May Be Added to Fees

U00000112831  
 04/14/04-80039-012 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MILLER, MARVIN
STREET ADDRESS	17153 ERICA ROSE COURT
CITY-ST-ZIP	BOCA RATON, FL 33496
TITLE	D
NAME	MILLER, BEVERLY
STREET ADDRESS	17153 ERICA ROSE COURT
CITY-ST-ZIP	BOCA RATON, FL 33496
TITLE	D
NAME	ALTMANN, LISA
STREET ADDRESS	3859 NW 53RD STREET
CITY-ST-ZIP	BOCA RATON, FL 33496
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 617, 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 information required.

**SIGNATURE:** *Marvin S. Miller*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #