

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000013113

FILED  
Apr 12, 2004  
Secretary of State

Entity Name: MILLIS HEATING & AIR CONDITIONING, INC.

## Current Principal Place of Business:

10319 MEADOW POINTE DR  
JACKSONVILLE, FL 32221

## New Principal Place of Business:

10319 MEADOW POINT DR  
JACKSONVILLE, FL 32221 US

## Current Mailing Address:

10319 MEADOW POINTE DR  
JACKSONVILLE, FL 32221

## New Mailing Address:

10319 MEADOW POINT DR  
JACKSONVILLE, FL 32221 US

FEI Number: 02-0549712

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

YELDELL, W. GARY  
VOLPE BAJALIA WICKS & ROGERSON  
1301 RIVERPLACE BLVD STE 1700  
JACKSONVILLE, FL 32207 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MILLIS, DAVID M  
Address: 10319 MEADOW POINTE DR  
City-St-Zip: JACKSONVILLE, FL 32221

Title: D ( ) Delete  
Name: MILLIS, SVEA O  
Address: 10319 MEADOW POINTE DR  
City-St-Zip: JACKSONVILLE, FL 32221

Title: D ( ) Delete  
Name: MILLIS, SVEA D  
Address: 8943 ROSE HILL DRIVE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32221

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MILLIS, DAVID M  
Address: 10319 MEADOW POINT DR  
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: D (X) Change ( ) Addition  
Name: MILLIS, SVEA O  
Address: 10319 MEADOW POINT DR  
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID M MILLIS

D

04/12/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date