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

**PROFIT CORPORATION** ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P94000008837 (4)

MILLER FLORIDA HOMES, INC.

Principal Place of Business Mailing Address 3634 GAVIOTA DR. 3634 GAVIOTA DR.

## **FILED** May 18 1998 8:00am Secretary of State



**RUSKIN FL 33573** RUSKIN FL 33573 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/03/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0476405 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the curry nt year Ingogible Yes No 24 25 29 30 Yes Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MILLER, MICHAEL L 3634 GAVIOTA DR. 82 Street Address (P.O. Box Number is Not Acceptable) RUSKIN FL 33573 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE □ DELETE 1.1 TiTL€ Change Addition LEWIS, MARCY M NAME 1.2 NAME 11111 BISCAYNE BLVD. P/H 52 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33181 CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE ☐ Change Addition NAME MILLER, MICHAEL L 2.2 NAME STREET ADDRESS 614 SUPERIOR AVE., N.W. 23 STREET ADDRESS CITY-ST-ZIP CLEVELAND OH 44113 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition MILLER, MICHAEL NAME 3.2 NAME 3634 GAVIOTA DR STREET ADDRESS 3.3 STREET ADDRESS Ruskin Fl 33573 CITY-ST-ZIP 3.4. CITY - \$1 - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME MILLER, MICHAEL L 4. 2 NAME 614 SUPERIOR AVE. N.W. STREET ADDRESS 4.3 STREET ADDRESS **QLEVELAND OH 44113** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 THEF Addition NAME LEWIS, MARCY 5.2 NAME 11111 BISCAYNE BLVD P/H 52 STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP **MIAMI FL 33181** 5.4 CITY - \$1 - ZIP DELETE TITLE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST-ZIP

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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this teport 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.