

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S80165

FILED  
Mar 30, 2006  
Secretary of State

Entity Name: KENNETH MILLER ARCHITECT, P.A.

## Current Principal Place of Business:

9682 SE HIGBORNE WY  
HOBE SOUND, FL 33455 US

## New Principal Place of Business:

## Current Mailing Address:

9682 SE HIGBORNE WY  
HOBE SOUND, FL 33455 US

## New Mailing Address:

FEI Number: 65-0282403      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILLER, KENNETH R.  
900 S US HWY 1  
RIVER PLAZA  
JUPITER, FL 33477 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: PD ( ) Delete  
Name: MILLER, KENNETH R  
Address: 9682 SE HIGHBURNE WAY  
City-St-Zip: HOBE SOUND, FL 33455

Title: VTS ( ) Delete  
Name: MILLER, BARBARA  
Address: 9682 SE HIGHBORNE WAY  
City-St-Zip: HOBE SOUND, FL 33455

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 Chapter 119, 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: KENNETH R. MILLER

PD

03/30/2006

Electronic Signature of Signing Officer or Director

Date