FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jul 16, 2002 8:00 am Secretary of State **DOCUMENT #** F93000005966 1. Entity Name 07-16-2002 90360 048 \*\*\*550.00 MILO B. MILLER ESTATE, INC. Principal Place of Business Mailing Address 171 BROADWAY 171 BROADWAY SARANAC LAKE NY 12983 SARANAC LAKE NY 12983 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FE! Number Applied For 15-0387965 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HYDE, GEORGE Street Address (P.O. Box Number is Not Acceptable) 1166 ORANGE AVENUE WINTER SPRINGS FL 32708 City 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. I am familiar with, and accept Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE PILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750,00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE STD Delete Change Addition NAME HYDE, BARBARA T NAME STREET ADDRESS 1516 CORAL OAK LANE STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32963 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME HYDE, F. THOMAS NAME STREET ADDRESS TRUDEAU ROAD STREET ADDRESS CITY-ST-ZIP SARANAC LAKE NY 12983 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition HYDE, GEORGE T NAME STREET ADDRESS 1166 ORANGE AVE STREET ADDRESS CITY-ST-ZIP WINTER SPRINGS FL 32708 CITY-ST-7IP TITLE ☐ Delete TITLE Addition J Carnell 171 Broadway ricia NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12983 TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE. ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 arthress, with all other like empowered.

## Attouhment F93000005966

we never received the first notice first notice an we get any an we get any kind of adjustments