

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 236381

**Entity Name:** EDWARD MILLER AND SON INC.

**Current Principal Place of Business:**

5015 S.W. SAVAGE ST.  
PALM CITY, FL 34990

**Current Mailing Address:**

P.O. DRAWER 837  
STUART, FL 34995

**FEI Number:** 59-6077545

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MILLER, VALERIE L  
230 SW BEACH WAY AVENUE  
PALM CITY, FL 34990 US

*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

**Officer/Director Detail :**

Title ST  
Name MILLER, VALERIE L  
Address 230 SW BEACH WAY AVENUE  
City-State-Zip: PALM CITY FL 34990

Title VD  
Name MILLER, EDWARD TROY  
Address 230 SW BEACH WAY AVENUE  
City-State-Zip: PALM CITY FL 34990

Title PD  
Name MILLER, EDWARD TROY  
Address 230 SW BEACH WAY AVENUE  
City-State-Zip: PALM CITY FL 34990

I hereby 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 all other like empowered.

**SIGNATURE:** VALERIE L. MILLER

**SECRETARY**

**03/18/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date