

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90093 012 ***150.00

0006759

DOCUMENT # 166189

1. Entity Name
MILLER & MORRIS, INC.

Principal Place of Business
725 N ATLANTIC AVE
DAYTONA BEACH FL 32118

Mailing Address
~~725 N ATLANTIC AVE~~
~~DAYTONA BEACH FL 32118~~

2. Principal Place of Business

3. Mailing Address
P O BOX 263035

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
DAYTONA BEACH FL 32126 3035

4. FEI Number **59-0667670**

Applied For
 Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

MILLER, CARL P. JR.
1115 FLAGSTONE DRIVE
DAYTONA BEACH FL 32118

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
	<input type="checkbox"/> Delete PD MILLER, CARL P. JR. 725 N ATLANTIC AVE DAYTONA BEACH FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1115 FLAGSTONE DRIVE DAYTONA BEACH FL 32118	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
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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 address, with all other like empowered.

SIGNATURE *Carl P. Miller Jr* **CARL P MILLER JR** **02/08/01** **904 555 1553**
Signature and typed or printed name of signing officer or director Date Daytime Phone #

2/3/01: JFW: ch

CR2E034 (10/00)