FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

197739

(6)

MILLER BEARINGS, INC.

Principal Place of Business

21

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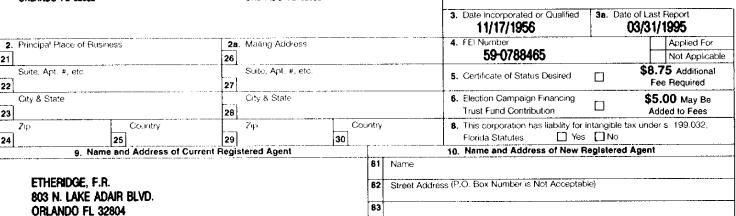
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DOCUMENT # Corporation Name

Mailing Address

17 S. WESTMORELAND DRIVE ORLANDO FL 32802

17 S. WESTMORELAND DRIVE ORLANDO FL 32902



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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

84 City

12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CSD	DELETE	1 1 TITLE	☐ Change ☐	Addition
4AMF	etheridge, f r		1.2 NAME		
TREET ADDRESS	803 LAKE ADAIR BL. N.		13 STREET ADDRESS		
IITY-ST-ZIF	ORLANDO FL 32804		1.4 CHTY - \$T - ZIP		
IILE	D	☐ DELETE	2 1 TITLE	☐ Change ☐	Additio
NAME	SHUMACHER, G A		2.2 NAME		
STREET ADDRESS	5403 PINETRAIL WAY		2.3 STREET ADDRESS		
DITN - ST - ZIP	ORLANDO FL		2.4 CITY - ST. ZIP		
ITLF	VD	☐ DELETE	3 1 THE	Change [Add to
AMÉ	SUAZO, BEN		3.2 NAME		
TREET ADDRESS	7553 WOODBRIAR CT		3.3 STREET ADDRESS		
CITY - \$1 - ZIP	ORLANDO FL		3.4 CITY - ST - ZIP		
IIcE	D	DELETE	4 1 TITLE	☐ Change ☐	Additi
AME	ANDERSON, R B		4 2 NAME		
TREE1 ADDRESS	151 N. PHELPS AVE.		4.3 STREET ADDRESS		
PTY-ST-ZiP	WINTER PARK FL 32789		4.4 CO y - ST - ZIF		
ITLE	TD	□ DELETE	5 1 TITLE	Change 🗀	Additi
LAME	FABER, C O		5.2 NAME		
STREET ADDRESS	5011 LIDO ST		5.3 STREET ADDRESS		
DITY - S1 - ZIP	ORLANDO FL 32807		5.4 CiTY - ST - ZiP		
TITLE	PD	DELETE	6 1 TITLE	☐ Change ☐	Additio
NAME	KELLEY, L E		6.2 NAME		
STREET ADDRESS	724 OAK ST		6.3 STHEE! ADDRESS		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 oath, that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, n address

6.4 CITY - S1 - ZIP

SIGNATURE:

CITY - ST - ZIE

ORLANDO FL 32804

TREESURE OFFICER OR DIRECTOR

APRIL 26,1896 401425-9078

CR2E034 (12/95)

Zip Code

85