


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 MAR 22 PM 3:28

DOCUMENT # 197739 1. Entity Name MILLER BEARINGS, INC.	
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Principal Place of Business 17 S. WESTMORELAND DRIVE ORLANDO, FL 32805	Mailing Address 17 S. WESTMORELAND DRIVE ORLANDO, FL 32805
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03162004 No Chg-P CR2E034 (10/03) 3/22

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0788465	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ETHERIDGE, EDNA R
803 LAKE ADAIR BL N
ORLANDO, FL 32804

DO NOT WRITE IN THIS SPACE

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 the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

000000093442
03/22/04-80018-005 158.75

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDST FABER, CRAIG O 2211 CROSS LAKE ROAD BELLE ISLE, FL 32809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUAZO, BEN 7553 WOODBRIAR CT ORLANDO, FL 32835
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BROCATO, RAYMOND 932 COOL SPRINGS CIR. OCOE, FL 34761
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEARS, LYNNE E P.O. BOX 394 PLYMOUTH, FL 32768
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ETHERIDGE, EDNA R 803 LAKE ADAIR BLVD. N. ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOHNSON, KEITH D 4209 BROOKE DR. VALRICO, FL 33594

DO NOT WRITE IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Craig Faber
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/04 407.425-9078
Date Daytime Phone #

2004 Uniform Business Report (UBR)

Miller Bearings, Inc.

Document # 197739

Additional Officer and Director

Title: D
Name: Schumacher, Glen A.
Street Address: 4591 South Hampton Dr.
City-ST-Zip: Orlando, FL 32812-5936

Title: CD
Name: Anderson, Richard B.
Street Address: 1273 Sara Court
City-ST-Zip: Winter Park, FL 32789
