

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 407081

FILED
Apr 26, 2005
Secretary of State

Entity Name: MILLER SAFE AND LOCK CO., INC.

Current Principal Place of Business:

923 SOUTH FLORIDA AVE. SUITE #101
SUITE #101
LAKELAND, FL 33803 US

New Principal Place of Business:

923 SOUTH FLORIDA AVE.
SUITE #101
LAKELAND, FL 33803 US

Current Mailing Address:

POST OFFICE BOX 1103
LAKELAND, FL 33802 US

New Mailing Address:

FEI Number: 59-1411440 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CROSBY, SAMUEL G
2323 S FLORIDA AVE
3RD FLOOR
LAKELAND, FL 33803 US

Name and Address of New Registered Agent:

CROSBY, SAMUEL G
2323 S FLORIDA AVE
LAKELAND, FL 33803 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: _____

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: KIRBY, MARILYN A
Address: 211 HAGER STREET
City-St-Zip: HUBBARD, OH 44425 US

Title: P () Delete
Name: DANIELS, SANDRA L
Address: 3418 IMPERIAL LANE
City-St-Zip: LAKELAND, FL 33813 US

Title: VP () Delete
Name: DANIELS, JOSHUA D
Address: 728 WEST BELMAR
City-St-Zip: LAKELAND, FL 33803 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change () Addition
Name: DANIELS, JAMES B
Address: 1050 WEST GEORGIA STREET
City-St-Zip: BARTOW, FL 33830 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CH () Change (X) Addition
Name: MARILYN, KIRBY A
Address: 211 HAGER STREET
City-St-Zip: HUBBARD, OH 44425

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: SANDRA L DANIELS

P

04/26/2005

Electronic Signature of Signing Officer or Director

Date