2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 407081

City-St-Zip: LAKELAND, FL 33809

FILED Apr 02, 2007 Secretary of State

Entity Na	me: MILLER S	SAFE AND LOCK CO., INC.			
Current P	rincipal Place	of Business:	New Principal Plac	New Principal Place of Business:	
POST OFFICE BOX 1103 LAKELAND, FL 33802 US			815 NORTH FLORIDA AVENUE LAKELAND, FL 33801 US		
Current N	lailing Addres	ss:	New Mailing Addre	New Mailing Address:	
	FICE BOX 110: D, FL 33802	3 US			
FEI Number	: 59-1411440	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
CROSBY, SAMUEL G 2323 S FLORIDA AVE LAKELAND, FL 33803 US		PUTNAM, ABLE A 500 S FLORIDA AVE 300 LAKELAND, FL 33801 US			
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATURE: ABLE A. PUTNAM				04/02/2007	
	Electror	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DANIELS, JAM	EORGIA STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVP (X DANIELS, SAN 3418 IMPERIAI LAKELAND, FL	_ LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () DANIELS, JOS 728 WEST BEI LAKELAND, FL	MAR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CHD (X MARILYN, KIRI 129 BENTLEY HUBBARD, OH	AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VP () KOTANSKY, SO 1227 COSTINE			(X) Change()Addition (Y, SCOTT A STINE ROAD	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

City-St-Zip: LAKELAND, FL 33809

SIGNATURE: SCOTT KOTANSKY **VPST** 04/02/2007