FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED

95 JUL 17 PM 3:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S 39332

1. Corporation Name
McMILLAN Enterprises, Inc.

Principal Place of Business
3127 Shoreline Drive
Clearwater, FL 34620

Mailing Address
Post Office Box 20521
St. Petersburg, FL 33742

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: March 18, 1991

3a. Date of Last Report: 1994

2. Principal Place of Business — 21 — Suite Apt # etc. — 22 — City & State — 23 — Zip — 24 — County — 25

2a. Mailing Address — 26 — Suite Apt # etc. — 27 — City & State — 28 — Zip — 29 — County — 30

4. FEI Number: 59-3075176 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. The corporation has liability for intangible tax under § 199.032 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
DAVID A. EATON, P.A.
7301 Ninth Street North
St. Petersburg, FL 33702

10. Name and Address of New Registered Agent
81 Name: RONALD L. McMillan
82 Street Address (P.O. Box Number is Not Acceptable): 3127 Shoreline Drive
83
84 City: Clearwater FL 85 Zip Code: 34620

11. Pursuant to the provisions of Section 607.0505, and/or 608.415 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, or by an officer or director as registered agent. I am familiar with, and accept the obligations of, Section 607.0505 Florida Statutes.

SIGNATURE: RONALD L. McMillan President — President 6/27/95

12. OFFICERS AND DIRECTORS

TITLE	President /Director
NAME	RONALD L. McMILLAN
STREET ADDRESS	3127 Shoreline Drive
CITY, ST, ZIP	Clearwater, FL 34620
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	7/17/95

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	☐ Change ☐ Addition
NAME	700001545797
STREET ADDRESS	-07/25/95--01106--003
CITY, ST, ZIP	****225.00 ****225.00
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ Change ☐ Addition
NAME	
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CITY, ST, ZIP	
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TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing, to the best of my knowledge, is true and complete and that I am aware of the penalties for the commission of a false filing under Section 817.155, Florida Statutes. I further certify that the information contained in this annual report or supplemental annual report is true and complete 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 owner or trustee or agent authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 hereof or I am attaching a list with the names and addresses.

SIGNATURE: President — President RONALD L. McMillan, Pres. 6/27/95 813-448-3811
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone