

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 542214

FILED  
Jan 08, 2009  
Secretary of State

Entity Name: MILLS ENGINEERING COMPANY

## Current Principal Place of Business:

604 E. HATHAWAY AVE.  
BRONSON, FL 32621 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 778  
BRONSON, FL 32621 US

## New Mailing Address:

FEI Number: 59-1760095

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILLS, H. LEE  
602 E. HATHAWAY AVE.  
BRONSON, FL 32621 US

## Name and Address of New Registered Agent:

MILLS, H. LEE  
604 E. HATHAWAY AVE.  
BRONSON, FL 32621 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:

01/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MILLS, H. LEE,  
Address: 205 S.W. 14TH STREET  
City-St-Zip: CHIEFLAND, FL

Title: V ( ) Delete  
Name: MILLS, HAROLD E.,  
Address: 3307 N.W. 84TH LANE  
City-St-Zip: CHIEFLAND, FL

Title: S ( ) Delete  
Name: MILLS, REGENA W  
Address: 205 SW 14TH STREET  
City-St-Zip: CHIEFLAND, FL 32626

Title: VP ( ) Delete  
Name: MILLS, REGENA W  
Address: 205 SW 14TH ST  
City-St-Zip: CHIEFLAND, FL

Title: VP ( ) Delete  
Name: CARSWELL, DONALD A  
Address: 14991 SE 50TH ST  
City-St-Zip: MORRISTON, FL 32668

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: REGENA W. MILLS

VP

01/08/2009

Electronic Signature of Signing Officer or Director

Date