

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 10, 2003 8:00 am**  
**Secretary of State**

02-10-2003 90178 007 \*\*\*158.75

**DOCUMENT # 547560**

1. Entity Name  
**ENGLAND, THIMS & MILLER, INC.**



Principal Place of Business  
**14775 ST. AUGUSTINE ROAD  
JACKSONVILLE FL 32258**

Mailing Address  
**14775 ST. AUGUSTINE ROAD  
JACKSONVILLE FL 32258**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1773930**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ENGLAND, JAMES E  
14775 ST AUGUSTINE RD  
JACKSONVILLE FL 32258**

Name **DOUGLAS, C. MILLER**

Street Address (P.O. Box Number is Not Acceptable)

**14775 ST AUGUSTINE RD**

City **JACKSONVILLE FL** Zip Code **32258**

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 *[Signature]*  
Signature, typed or printed name of registered agent and title if applicable.

**Douglas C. Miller, CEO 2/4/03**

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CSD ENGLAND, JAMES E 14775 ST AUGUSTINE RD JACKSONVILLE FL 32258</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PTD MILLER, DOUGLAS C. 14775 ST AUGUSTINE RD JACKSONVILLE FL 32258</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>EVD MATHEWS, N. HUGH 14775 ST AUGUSTINE RD JACKSONVILLE FL 32258</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>EV TARVER, JOSEPH A. 14775 ST AUGUSTINE RD JACKSONVILLE FL 32258</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V CRAMMOND, JEFFREY A 14775 ST AUGUSTINE RD JACKSONVILLE FL 32258</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V CRISSINGER, SAMUEL R 14778 ST AUGUSTINE RD RIPLEY NY 14775</b> <input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CSD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PTD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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:

**SIGNATURE REQUIRED Samuel R. Crissinger 2/4/03 (904) 612-8990**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

UNIFORM BUSINESS REPORT SUPPLEMENT

*Attachment # 547560*  
ENGLAND, THIMS & MILLER, INC.  
14775 St Augustine Road  
Jacksonville, FL 32258

59-1773930

*8W25044*

Block 11 - Officers

Title V  
Name Frank M. Child, III  
Address 14775 St Augustine Road  
Jacksonville, FL 32258

Title V  
Name Juanitta B. Clem  
Address 14775 St Augustine Road  
Jacksonville, FL 32258

Title V  
Name Preston S. Doub  
Address 14775 St Augustine Road  
Jacksonville, FL 32258

Title V  
Name Ka Tai Ma  
Address 14775 St Augustine Road  
Jacksonville, FL 32258

Title V  
Name Robert A. Mizell, Jr  
Address 14775 St Augustine Road  
Jacksonville, FL 32258

Title V  
Name Bryan R. Stewart  
Address 14775 St Augustine Road  
Jacksonville, FL 32258

Title V  
Name Scott A. Wild  
Address 14775 St Augustine Road  
Jacksonville, FL 32258

Title V  
Name Buckley K. Williams  
Address 14775 St Augustine Road  
Jacksonville, FL 32258