


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 14, 2008 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # 564974 1. Entity Name MCMILLAN, UNRUH & DAVIS, P.A. |  |
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|---|---|
| Principal Place of Business 701 E. COMMERCIAL BLVD 3RD FLOOR FORT LAUDERDALE, FL 33334 | Mailing Address 701 E. COMMERCIAL BLVD 3RD FLOOR FORT LAUDERDALE, FL 33334 |
|---|---|



01092008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|-----------------------------|-------------------------------|
| 4. FEI Number 59-1786606 | Applied For Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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|--|
| 6. Name and Address of Current Registered Agent UNRUH, JIM D 701 E. COMMERCIAL BLVD., 3RD FLOOR FORT LAUDERDALE, FL 33334 |
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

U000000781012
01/15/08-80017-008 150.00

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSD UNRUH, JIM D 701 E. COMMERCIAL BLVD., 3RD FLOOR FORT LAUDERDALE, FL 33334 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PTD DAVIS, SUSAN 701 E. COMMERCIAL BLVD., 3RD FL FORT LAUDERDALE, FL 33334 |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Susan Davis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/08 954 776 4774
Date Daytime Phone #