

# 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 598842

Entity Name: MILLER'S PLUMBING COMPANY, INC.

FILED  
Apr 14, 2009  
Secretary of State

## Current Principal Place of Business:

2411 FLEISCHMAN RD  
TALLAHASSEE, FL 32308

## New Principal Place of Business:

## Current Mailing Address:

2411 FLEISCHMAN RD  
TALLAHASSEE, FL 32308

## New Mailing Address:

FEI Number: 59-1884332      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MILLER, M HUNTER, III  
5068 CENTENNIAL OAKS CIRCLE  
TALLAHASSEE, FL 32308      US

## Name and Address of New Registered Agent:

MILLER, HEATH HUNTER  
900 PARKVIEW DRIVE  
TALLAHASSEE, FL 32311      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: HEATH HUNTER MILLER

04/14/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MILLER, M HUNTER III  
Address: 2411 FLEISCHMAN RD  
City-St-Zip: TALLAHASSEE, FL

Title: VP ( ) Delete  
Name: BICE, WILLIAM  
Address: 2411 FLEISCHMAN ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: ST ( ) Delete  
Name: FERRELL, PAULA N  
Address: 2411 FLEISCHMAN ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP (X) Delete  
Name: MILLER, HEATH HUNTER  
Address: 2411 FLEISCHMAN ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MILLER, HEATH HUNTER  
Address: 2411 FLEISCHMAN RD  
City-St-Zip: TALLAHASSEE, FL 32308

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: PAULA N FERRELL

ST

04/14/2009

Electronic Signature of Signing Officer or Director

Date