2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 06, 2006 8:00 am Secretary of State **DOCUMENT #672314** 03-06-2006 90018 005 ***150.00 MILLS SEPTIC TANK SERVICE, INC. Principal Place of Business Mailing Address 2021 N E 20TH STREET 2021 N E 20TH STREET 40024822 OCALA, FL 34470 US OCALA, FL 34470 US 01182006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2007099 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MERRIAM, LAUREN E III DO NOT WRITE 4 SOUTHEAST BROADWAY OCALA, FL 34471 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE PD MILLS, JOHN R. NAME STREET ADDRESS 376 SE 52 CT CITY-ST-ZIP OCALA, FL 34471 TSD TITLE MILLS, LYDIA B. STREET ADDRESS 376 SE 52 CT CITY-ST-ZIP OCALA, FL 34471 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS

FILED