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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

THE MILLS REALTY GROUP, INC.	
Principal Place of Business	Mailing Address
1880 GULF BLVD STE 1101 CLEARWATER FL 34630- 33767 US	1880 GULF BLVD STE 1101 CLEARWATER FL 34830 53767 US

**FILED** Apr 27 1998 8:00am Secretary of State

**DOCUMENT #** (1)DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>06/05/1980</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2004312 21 26 Not Applicable Suite, Apl #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Zip 8. This corporation owes or has paid the current year intangible 29 30 Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent Name MILLS, ELLI M. A. 1860 GULF BLVD 82 Street Address (P.O. Box Number is Not Acceptable) **STE 1101** CLEARWATER FL 84630 33767 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typied or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Addition DELETE 1.1 TITLE ☐ Change TITLE MILLS, ELLI M A NAME 1.2 NAME 1660 GULF BLVD #1101 STREET ADDRESS 1.3 STREET ADDRESS CLEARWATER FL 33767 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME MILLS, ELLI M A 2.2 NAME STREET ADDRESS 1660 GULF BLVD #1101 2.3 STREET ADDRESS CLEARWATER FL 33767 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4 1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY ST ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY ST-ZIP 5.4 CITY - ST - ZIP DELETE Change TITLE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental enrural 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it entanged or in any historium with fin address.

**SIGNATURE**