

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000007145

Entity Name: WM. MILLER'S SONS, INC.

FILED
Jul 12, 2005
Secretary of State

Current Principal Place of Business:

4377 WM. FLYNN HIGHWAY
ALLISON PARK, PA 15101

New Principal Place of Business:

Current Mailing Address:

4377 WM. FLYNN HIGHWAY
ALLISON PARK, PA 15101

New Mailing Address:

FEI Number: 25-1587652

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MILLER, RICHARD R SR
8 TROPICANA DR.
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPS () Delete
Name: MILLER, RICHARD R SR
Address: 8 TROPICANA DRIVE
City-St-Zip: PUNTA GORDA, FL 33950

Title: PS () Delete
Name: MILLER, RICHARD R JR
Address: 4257 MT. ROYAL BLVD.
City-St-Zip: ALLISON PARK, PA 15101

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: RICHARD R. MILLER JR.

PS

07/12/2005

Electronic Signature of Signing Officer or Director

Date