FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



*FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # **F08937**

(7)

THE MILLS LAND DEVELOPMENT GROUP, INC

Principal Place of Business Mailing Address 801 W. BAY DRIVE, SUITE 800 801 W. BAY DRIVE, SUITE 800 C/O ELLI M.A. MILLS C/O ELLI M.A. MILLS LARGO FL 34840-0223 LARGO FL 33770-3223 3. Date Incorporated or Qualified 3a. Date of Last Report 12/12/1980 02/29/1996 4. FEI Number 2. Principal Place of Business 26. Mailing Address Applied For 59-2045635 Not Applicable 1660 GULF BOULEVARD 1660 GULF BOULEVARD Suite, Apt. #, etc. Suite, Apt. #, etc. 1101 \$8.75 Additional П 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing CLEARWATER. CLEARWATER 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, ^Z04630 USA **\$**4630 Yes No Florida Statutes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent В1 Name MILLS, ELLI M.A. ELLI M. A. MILLS **801 WEST BAY DRIVE** Street Address (P.O. Box Number is Not Acceptable)
1660 GULF BOULEVARD 82 **LARGO FL 34640** 83 #1101 84 City 85 Zip Code CLEARWATER 34630 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. Stiphature, typed or perition name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 96/6 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change Addition DELETE TITLE 1.1 TITLE MILLS, ELLI MA 1.2 NAME NAME MILLS, ELLI M A **801 W BAY DR** STREET ADORESS 1.3 STREET ADDRESS 1660 GULF BLVD #1101 LARGO FL CLEARWATER FL 34630 CHY+SI-ZIP 1.4 CITY-ST-ZIP EXV DELETE Change ☐ Addition 21 TIBE TITLE MILLS, DONNA W MILLS, DONNA W 2.2 NAME 3050 SANDPIPER CT 801 W BAY DR 2.3 STREET ADDRESS STREET ADDRESS LARGO FL CLEARWATER FL 34622 2. 4 CITY-ST-ZIP DITY-ST-ZIP DELETE Change Addition 3.1 THTLE TITLE MILLS, ELLI MA 3.2 NAME MILLS, ELLI M A NAME 801 W BAY DR \$660 GULF BLVD #1101 3.3 STREET ADORESS STREET ADDRESS LARGO FL CLEARWATER PL 34630 3.4. CITY-ST-ZIP CITY - \$1 - 20P Change Addition □ DELETE 4.1 TITLE TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 City - ST-ZIP CITY-ST-7P DELETE Change Addition TITLE 5.1 TIFLE 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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 priorit of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or Block

STHEET ADDRESS

City - St - 7IP

Date Daysme Prione #

FILED

May 19 1997 8:00am

Secretary of State