

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000003741 (6)

1. Corporation Name

MILLER & HARTMAN SOUTH, INC.

Principal Place of Business

**180 GREENFIELD ROAD
LANCASTER PA 17603**

Mailing Address

**180 GREENFIELD ROAD
LANCASTER PA 17603**

FILED

95 JAN 23 AM 10:29

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/17/1993

3a. Date of Last Report

03/01/1994

4. FEI Number

62-1317712

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$9.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt., #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt., #, etc.

27

City & State

28

Zip

Country

30

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81

Name

82

Street Address (P.O. Box Number is Not Acceptable)

83

84

City

FL

85

Zip Code

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, typed or printed name of registered agent, and the address

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PCD
NAME	BROWN, JOHN H JR.
STREET ADDRESS	180 GREENFIELD ROAD
CITY - ST - ZIP	LANCASTER PA 17603
TITLE	VD
NAME	BROWN, JOHN H III
STREET ADDRESS	180 GREENFIELD ROAD
CITY - ST - ZIP	LANCASTER PA 17603
TITLE	V
NAME	JONES, WAYNE
STREET ADDRESS	HIGHWAY 920, EAST INDUSTRIAL PARK
CITY - ST - ZIP	LEITCHFIELD KY 42754
TITLE	D
NAME	BROWN, MARGARET
STREET ADDRESS	180 GREENFIELD ROAD
CITY - ST - ZIP	LANCASTER PA 17603
TITLE	D
NAME	ROBERSON, MARGARET B
STREET ADDRESS	180 GREENFIELD ROAD
CITY - ST - ZIP	LANCASTER PA 17603
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY - ST - ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY - ST - ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY - ST - ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY - ST - ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY - ST - ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 687, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an addition.

SIGNATURE:

Wayne Jones

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

1-17-95 502-259-9341

Date

Telephone Number