

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 29, 2007 8:00 am
Secretary of State

01-29-2007 90077 023 ***158.75

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1. Entity Name

GLENN MILLER PRODUCTIONS, INC.



Principal Place of Business

5221 STRAND BLVD.
STE 302
NAPLES FL 34110
US

Mailing Address

5221 STRAND BLVD.
STE 302
NAPLES FL 34110
US



2. Principal Place of Business - No P.O. Box #

5221 STRAND BLVD.

3. Mailing Address

SAME

Suite, Apt. #, etc.

STE. 302

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

NAPLES, FL

City & State

4. FEI Number

13-5650273

Applied For

Not Applicable

Zip

34110

Country

US

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HARTER, SECREST & EMERY
5551 RIDGEWOOD DR., STE 405
NAPLES FL 34108

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 - applicable.

(NOTE: Registered Agent signature not required when re-registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007: Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME MACKAY, DAVID JR
STREET ADDRESS 1059 SPANISH MOSS TRAIL
CITY-ST-ZIP NAPLES FL 34108

TITLE EV ☐ Delete
NAME DESTEFANO, CHARLES
STREET ADDRESS 291 BALD EAGLE RUN
CITY-ST-ZIP LAKE MARY FL 32746

TITLE VSD ☐ Delete
NAME MACKAY, CONSTANCE L
STREET ADDRESS 1059 SPANISH MOSS TRAIL
CITY-ST-ZIP NAPLES FL 34108

TITLE TDAS ☐ Delete
NAME O'REILLY, TERRENCE P
STREET ADDRESS 97 NEW CHALET DRIVE
CITY-ST-ZIP MOHEGAN LAKE NY 10547

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CHIEF EXECUTIVE OFFICER ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PRESIDENT ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ASSISTANT VICE PRESIDENT ☐ Change ☒ Addition
NAME GREGORY A. PARSELL
STREET ADDRESS 109 MAGNOLIA PARK TRAIL
CITY-ST-ZIP SANFORD, FL 32773

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

David Mackay, Jr. CEO (DAVID MACKAY, JR.)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/07 239-514-7880

Date

Daytime Phone #