2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000000003

Entity Name: GLENN MILLER PRODUCTIONS, INC.

FILED Jan 07, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
5621 STR/ STE 302	AND BLVD.			801 INTERNATIONAL PA	ARKWAY	
NAPLES, I	FL 34110 l	JS		LAKE MARY, FL 32746	US	
Current Mailing Address:				New Mailing Address:		
5621 STRAND BLVD.				801 INTERNATIONAL PARKWAY		
STE 302 NAPLES, F	FL 34110 l	JS		5TH FLOOR LAKE MARK, FL 32746	US	
FEI Number:	: 13-5650273	FEI Number Applied For ()	FEI Nur	mber Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of	Current Registered Agent:		Name and Address of N	lew Registered Agent:	
HARTER, SECREST & EMERY 5551 RIDGEWOOD DR., STE 405 NAPLES, FL 34108 US				CHARLES T. DESTEFANO 801 INTERNATIONAL PARKWAY LAKE MARY, FL 32746 US		
	named entity e of Florida.	submits this statement for the po	urpose c	of changing its registered o	ffice or registered agent, or both,	
SIGNATURE: CHARLES T. DESTEFANO				01/07/2009		
	Electro	nic Signature of Registered Age	nt		Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	CEO (MACKAY, DAV 1059 SPANISH NAPLES, FL 3	HMOSS TRAIL		Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	P (DESTEFANO, 291 BALD EAC LAKE MARY, F	GLE RUN		Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	VSD (MACKAY, CON 1059 SPANISH NAPLES, FL 3	HMOSS TRAIL		Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	O'REILLY, TER 97 NEW CHAL			Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address:	AVP (PARNELL, GR 109 MAGNOLI			Title: () Name: Address:	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

City-St-Zip:

SIGNATURE:	DAVID MACKAY, JR.	CEO	01/07/2009

City-St-Zip: SANFORD, FL 32773