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

PROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

MILLS REALTY INC.

Mailing Address

Principal Place of Business

P () B() 1206

FILED Apr 29 1997 8:00am Secretary of State



BELLEVIEW FL 34420		BELLEVIEW FL 34421-1206				
					3. Date Incorporated or Qualified 09/20/1982	3a, Date of Last Report 05/01/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26			59-2218855	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for in	ntangible tax under s. 199.032,
24	25	29	30		Florida Statutes Yes No	
	g, Name and Address of Currer	il Registered Agent		٠,	10. Name and Address of New Reg	Istered Agent
	LS, JOE JR		١	1 Name		
	2 SE 110TH STREET LEVIEW FL 32620		Ĺ.		ress (P.O. Box Number is Not Acceptabl	0)
			6	3		
			6	4 City		FL 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	2 and 607.1508, Florida Statuti of Florida. Such change was a ations of, Section 607.0505, Flo	es, the abo authorized orida Statut	ive-named corp by the corpora es.	poration submits this statement for the pution's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE	Signature, typed or printed name of registered age	int and title if applicable. (NOII)	L Registered /	gent s-gnature requi	ired when reinstalling)	DATE
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 101.0			Change Addition c
NAME	MILLS, JOE JR.		1.2 NAM	£		;
STREET ADDRESS	4872 SE 110TH ST.			ET ADDRESS		c
CITY-ST-ZIP	BELLEVIEW FL 34420		1.4 CITY - ST - ZIP			
TITLE	STD	☐ DELETE	2.1 THLE			Change Addition
NAME	MILLS, MARY L	2.21				
STREET ADDRESS	4872 SE 110TH ST. BELLEVIEW FL 33420		2.3 STREET ADDRESS			
CITY-ST-ZIP				- ST - ZIP		
TITLE			3.1 7(1)			☐ Change ☐ Addition
NAME OXOSET ADDRESS			3.2 NAM	J		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		DLLFTE 4.1 TIT		- ST - ZIP		Change Addition
NAME	_		4.2 NAN			Change Addition
STREET ADDRESS			I I	ET ADDRESS		
CITY-ST-ZIP						
TITLE		DELETE	4.4 CITY+ST-ZIP 5.1 TITLE			Change Addition
NAME			5.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			5.4 CHY			
TITLE		DELETI.	6.1 TITLE	~~ -		Change Addition
NAME			6.2 NAM	<u>. </u>		_ ,
STREET ADDRESS			6.3 STRE	E1 ADDRESS		
CITY-ST-ZIP			64 CITY			

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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 is charged, or on an attachment with an address.