Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90190 013 \*\*\*158.75

## FICE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # G00570

1. Corporation Name

MILLS REALTY INC.

Principal Place of Business		Mailing Address			1 (55(11) 53(1 53(1) 56(1) 56(1) 56(1) 56(1) 56(1) 56(1) 56(1)		
4872 SE 110TH BELLEVIEW FL	=	P. O. BOX 1206 BELLEVIEW FL 34420			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 09/20/1982		
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number App ied For		
21		26	26		59-22 18855 Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & S at	<del></del>	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution Added to Fees		
Zip	Country 25	Zip 30	Country		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No		
	1-1	Current Registered Agent			10. Name and Address of New Registered Agent		
			81	Name			
MILLS, JOE JR			82	Street A	Address (P.O. Box Number is Not Acceptable)		
4872 SE 110TH STREET							
BELLEVIEW FL 32620			83				
			84	City	FL 85 Zip Code		
office or n	egistered agent, or both, in the m familiar with, and accept the	e State of Florida, Such change was autre e obligations of Section 607.0505, Florida	orized by a Statutes	ine corpor	co-poration submits this statement for the purpose of changing its registered pration's board of cirectors. I hereby accept the appointment as registered		
12.		stered agent and title if applicable. (NOTI:: Re ERS AND DIRECTORS	13.		ADDITICINS/CHANGES TO OFFICERS AND DIRECTOF'S IN 12		
TITLE	PD	DELETE	1.1 TITLE		Change Addition		
NAME	MILLS, JOE JR.		1.2 NAME				
STREET ADORESS	4872 SE 110TH ST.		1.3 STREET ADDRESS				
CITY-ST-ZIP	<b>BELLEVIEW FL 34420</b>		1.4 CITY-ST-ZIP				
TITLE	STD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition		
NAME	MILLS, MARY L		2.2 NAME				
STREET ADDRESS	4872 SE 110TH ST.		2.3 STREET ADDRE				
CITY-ST-ZIP	BELLEVIEW FL 33420		2. 4 CITY-ST-ZIP		Charge Addition		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition		
NAME			3.2 NAME				
STREET ADDRE 3S	5.00			† ADDRESS			
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP	☐ Change ☐ Addition		
TITLE		☐ DELETE	4.1 TITLE		Change Addition		
NAME			4. 2 NAME				
STREET ADDRE 3S			4.3 STREE	TADDRESS			

CITY-ST-ZIP 14. I hereby certify that the informat on 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 unrual 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 recuired by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or one an attachment with an address, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

63 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

DELETE

DELETE

Change

Change

Addition

Addition