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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # H13504

(6)

MILLBROOK PROPERTIES, INC.  Principal Place of Business Mailing Address  * ALLEN L. MILLS  * ALLEN L. MILLS									
1211 ILLINOIS STREET 1211 ILLINOIS STREET									
ORLANDO FL 3	32803	ORLANDO FL 32803-4128				3. Date Incorporated or Qualified		ate of Last R	eport
Principal Place of Business     2a. Mailing Address			-			07/23/1984 4. FEI Number		<b>05/1996</b>   Ap	oplied For
21 26						59-2641256		<u> </u>	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			,	• • • •		5. Certificate of Status Desired		\$8.75	
22		27						Fee Re	
City & State City & State						6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1	
Zip	Country	Zip	Cou	intry		This corporation has liability for			
24	25	29	30	,			Yes [		
	9. Name and Address of Cu					10. Name and Address of New Re	gistered /	Agent	
MILL	.S, ALLEN L.			81	Name				
1211 ILLINOIS ST.				82	Street Addr	ess (P.O. Box Number is Not Acceptate	ile)		
ORL	ANDO FL 32803			83				<del></del> -	<u></u>
				84	City		FL	85 Zip (	Code
11. Pursuant office or ragent. La	to the provisions of Sections 607 registered agent, or both, in the S am familiar with, and accept the o	0502 and 607.1508, Florida Statu tate of Florida. Such change was bligations of, Section 607.0505, Fl	es, the al authorize orida Stat	bove d by tutes	-named corp the corporat	coration submits this statement for the prior's board of directors. I hereby accept	ourpose of of the app	changing it ointment as	s registered registered
	Signature, typed or printed name of registere	. <u></u>		d Ager	l signature requir	red when reinstating)	DATE	DIDECTOR	OC IN 10
12.		OFFICERS AND DIRECTORS 13				ADDITIONS/CHANGES TO OFFICE	JEHS ANL	Change	Addition
TITLE	ST AND S DEVICES V			11 TITLE 12 NAME					
STREET ADDRESS	1211 ILLINOIS ST.				ADDRESS				
CITY-ST-ZIP	ORLANDO FL		1.4 CITY - ST - ZIP		-ZIP				
TITLE				TLE				Change	Addition
NAME	MILLS, ALLEN L.		2.2 NAME						
STREET ADDRESS	1211 ILLINOIS ST.		2.3 STREF						
C TY - ST - ZIP	ORLANDO FL	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Γ- ZIP			Change	Addition
TITLE NAME				3.1 NAME					Number
STREET ADDRESS					ADDRESS				
C-TY-ST-ZIP				3.4. CITY-ST-ZIP					
TITLE				4.1 TITLE				Change	Addition
NAME			4. 2 N	IAME					
STREET ADDRESS			4.3 \$7	TREET	ADDRESS				
CITY-ST-ZIP				ITY - ST	- ZIP			Chases	Addition
TITLE		☐ DELETE	5.1 Ti					Change	Addition
NAME			5.2 N		ADDRESS				
STREET ADDRESS CITY-ST-ZIP			. E	ITY-ST					
TITLE		DELETE	6.1 TI					Change	Addition
NAME			6.2 N	AME	-				
STREET ADDRESS	F		6.3 S	TREET	ADDRESS				
CITY-ST-7/P			6.4 CI	ITY-ST	í-ZIP				

14. 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 if changed, or on an attachment with an address.

JONANIA BLOWER

2/10/07

904 412 4CK7

**FILED** 

Feb 18 1997 8:00am

Secretary of State