## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# H51734

Entity Name: NICK MILLER, INC.

FILED Jul 31, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

2560 RCA BLVD SUITE 105 PALM BCH.GARDENS, FL 33410

Current Mailing Address: New Mailing Address:

2560 RCA BLVD.,STE.105 PALM BCH.GARDENS, FL 33410

FEI Number: 59-2545213 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GORDON, STEPHEN M
6389 SHADOW CREEK VILLAGE CIRCLE
LAKE WORTH, FL 33463 US
GORDON, STEPHEN M
9692 PRESTANCIA WAY
TALLAHASSEE, FL 32312 US

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.

SIGNATURE: STEPHEN M GORDON 07/31/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name:GORDON, STEPHEN MName:GORDON, STEPHEN MAddress:6389 SHADOW CREEK VILLAGE CIRCLEAddress:9692 PRESTANCIA WAYCity-St-Zip:LAKE WORTH, FL 33463City-St-Zip:TALLAHASSEE, FL 32312

Title: EVP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ALBRITTON, KIMBERLY S
 Name:

 Address:
 725 SW COLLEGE PARK ROAD
 Address:

 City-St-Zip:
 PORT SAINT LUCIE, FL 34953
 City-St-Zip:

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 CLANCY, STEPHEN J
 Name:
 CLANCY, STEPHEN J

 Address:
 4019 YARDLEY CIRCLE
 Address:
 2829 ROSCOMMON DRIVE

 City-St-Zip:
 TALLAHASSEE, FL 32309
 City-St-Zip:
 TALLAHASSEE, FL 32309

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WHITAKER, TIMOTHY C
 Name:

 Address:
 P.O. BOX 33253
 Address:

 City-St-Zip:
 PALM BEACH GARDENS, FL 33410
 City-St-Zip:

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.

SIGNATURE: STEPHEN M GORDON P 07/31/2007