

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J02070

1. Entity Name

FRANK MICHAEL MILLER BUILDER, INC.



**FILED**  
**Aug 16, 2000 8:00 am**  
**Secretary of State**

08-16-2000 90012 015 \*\*\*150.00

Principal Place of Business

2995 MILLER AVENUE  
ORANGE CITY FL 32763

Mailing Address

2995 MILLER AVENUE  
ORANGE CITY FL 32763

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2654429

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MILLER, FRANK MICHAEL  
2995 MILLER AVENUE  
ORANGE CITY FL 32763

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	MILLER, FRANK MICHAEL	2995 MILLER AVENUE	ORANGE CITY FL	<input type="checkbox"/>
ST	MILLER, SUSAN J.	2995 MILLER AVENUE	ORANGE CITY FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Frank Michael Miller* Pres  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-31-00  
Date

Daytime Phone #

CR2E034 (5/00)

From: Frank M. Miller Pres. <sup>attachment # 302010</sup> <sup>ACCT 30867-31-00</sup>

To: Division of Corporations of Fla.

Ref: The 2,000 Uniform Business report

The business never recieved the 1<sup>st</sup> Notice. A call was placed the middle of June to send a report to file for year 2,000. Enclosed is a check for 150<sup>00</sup> the original Amount.

Thank You

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Frank M. Miller Pres.