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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortimer
State
DIVISION OF CORPORATIONS

DOCUMENT # J08580

(9)

1. Corporation Name

MILLER/MANUEL, INC.

Principal Place of Business

**4401 NW 25TH PLACE
SUITE M
GAINESVILLE FL 32606**

Mailing Address

**4401 NW 25TH PLACE
SUITE M
GAINESVILLE FL 32606**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/09/1986

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2662505

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. The corporation has liability for intangible tax under S. 199.032

Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

21 5007-B NW 34th St

Suite, Apt. #, etc.

22 Gainesville, FL

City & State

23 32605

Zip

Country

2a. Mailing Address

25 5007-B NW 34th St

Suite, Apt. #, etc.

27 Gainesville, FL

City & State

28 32605

Zip

Country

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

9. Name and Address of Current Registered Agent

**MILLER, GARY L.
4401 NW 25TH PLACE
SUITE M
GAINESVILLE FL 32601**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent or officer of corporation, if applicable

NOTE: Registered Agent signature required when removing

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
DS	MILLER, GARY L.	1426 NW 35TH TERRACE	GAINESVILLE FL
D	MANUEL, TONY	5235 NW 64TH BLVD	GAINESVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY, ST, ZIP	Change	Addition
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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, unchanged, or as an addition with an address.

SIGNATURE:

Gary L. Miller

SIGNATURE AND TITLE OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

4/24/95

DATE

904-373-5501

TELEPHONE NUMBER