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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K12009

(2)

THE MILLAR COMPANY, U.S.A., INC.

Principal Place of Business

Mailing Address

1705 \$ 8TH ST

1705 S 8TH ST FORT PIERCE FL 34950-810

FILED Feb 04 1997 8:00am Secretary of State



	FORT PIERCE FL 349504		İ			
			3. Date Incorporated or Qualified 01/15/1988	3a. Date	of Last 9/1996	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number		T 1	Applied For
21	26		65-0028233			Not Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc.		6. Certificate of Status Desired			Additional Required
City & State	City & State		Election Campaign Financing Trust Fund Contribution			O May Be d to Fees
Zip Country	Zip	Country	8. This corporation has liability for i	intangible te	 	
24 25	29	30		Yes 🔲		
9. Name and Address of Cu	irrent Registered Agent		10. Name and Address of New Re	gistered A	gent	
MILLAR, HUDSON C., JR		81 Name				
1705 S. 8TH ST		82 Street A	Address (P.O. Box Number is Not Acceptab	Jal		
FORT PIERCE FL 34947		OK SHOELY	rodress (r.o. box number is not Acceptat	7 0 7		
		83				
		\ <u>-</u>	***************************************		T T	
		84 City		FL	85 Zi	p Code
 Pursuant to the provisions of Sections 607 office or registered agent, or both, in the agent I am familiar with, and accopt the of SIGNATURE. 	State of Florida. Such change was	s authorized by the corp	oration's board of directors. I hereby accept	ot the appoi	intment a	as registered
Signature: typicd or printed name of register	ed agent and tide if applicable [N	OTE Registered Agent signature		DATE		
	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC			
TITLE PTD	☐ DELETE	1.1 TITLE		ι	Change	e 🔲 Addition
NAME MILLAR, HUDSON C., JR		1.2 NAME				
STREET ADDRESS 1705 S. 8TH ST		1.3 STREET ADDRESS				
CITY-ST-ZIP FORT PIERCE FL		1.4 CITY-ST-ZIP				
TITLE VSD	L_ DELETE	2.1 TITLE		L	Change	e 📙 Addition
NAME MILLAR, HELEN V.		2.2 NAME				
STREET ADDRESS 2710 DOVE ST		2.3 STREET ADDRESS				
CHY-ST-ZIP FORT PIERCE FL		2. 4 CłTY - ST - ZIP				
TITLE	☐ DELETE	3.1 TITLE		. ل	Changi	e Addition
NAME		9.2 NAME				
STREET ADDRESS		3.3 STREET ADDRESS				
CITY-ST-ZIP		3.4. CITY+ST+ZIP			1.5	T 1 4 1 4 60
TITLE	☐ DELETE	4.4 TITLE		L	Change	e Addition
NAME		4.2 NAME				
STREET ADDRESS		4.3 STREET ADDRESS				
CITY-ST-ZIP	Driver	4 4 City-St-ZiP			Char	a and the
TIFLE	☐ DELETE	51 TITLE		L	Change	e Addition
NAME		5.2 NAME				
STREET ADDRESS		5.3 STREET ADDRESS				
CITY-ST-ZiP	T brusze	5.4 CITY - ST - ZIP			Chara	
TITLE	DELETE	6.1 TITLE		ι	Chang	e Maddition
NAME		6.2 NAME				
STREET ADDRESS		6.3 STREET ADDRESS				
CITY-ST-ZIP		6.4 CITY - ST - ZIP	to die Carina 110 67/37/3 Florida Carta			

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 hanged, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRECED

HUDSON C. MILLAR, JR.

JAN 28 97

(561)466-5086