

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 24 1998 8:00 am  
Secretary of State

DOCUMENT # K55101 (5)  
1. Corporation Name  
J. MILLAR AND SONS, INC.

Principal Place of Business  
% FAIRVIEW GOLF COURSE  
2419 AVON GENESCO RD  
AVON NY 14414

Mailing Address  
1555 PALM BEACH LAKES BLVD  
SUITE 1000  
WEST PALM BEACH FL 33401



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified  
12/30/1988

4. FEI Number  
65-0117857  
Applied For  
Not Applicable

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

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

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 4420 Beacon Circle

27 Suite, Apt. #, etc.  
Suite 100

28 City & State  
West Palm Beach, FL

29 Zip Country  
33407 USA

9. Name and Address of Current Registered Agent

DAMON, CONRAD  
1555 PALM BEACH LAKES BLVD.  
SUITE 1000  
WEST PALM BCH FL 33401

10. Name and Address of New Registered Agent

81 Name  
Damon, Conrad Esq.  
82 Street Address (P.O. Box Number is Not Acceptable)  
4420 Beacon Circle  
83 Suite 100  
84 City  
West Palm Beach FL 85 Zip Code  
33407

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: typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PS  
NAME MILLAR, STEWART  
STREET ADDRESS 44 YACHT CLUB PLACE  
CITY-ST-ZIP TEQUESTA FL

TITLE V  
NAME MILLAR, JAMES  
STREET ADDRESS % FAIRVIEW GOLF COURSE, 2419 AVON GENESCO  
CITY-ST-ZIP AVON NY 14414

TITLE VT  
NAME MACKAIL, RON  
STREET ADDRESS 636 US HWY ONE, SUITE 118  
CITY-ST-ZIP NORTH PALM BEACH FL 33408

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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, or on an attachment with an address.

SIGN  
HERE

4000002499184  
-04/24/98--01022--005  
\*\*\*150.00