

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K60047

Entity Name: MILLING, INC.

FILED
Mar 18, 2008
Secretary of State

Current Principal Place of Business:

327 E Highbanks Rd
DeBary, FL 32713

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 530128
DeBary, FL 327530128

New Mailing Address:

FEI Number: 59-2927883

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLYNN, WILLIAM J
16019 E. Shirley Shores Rd.
TAVARES, FL 32778 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FLYNN, WILLIAM
Address: 16019 E. Shirley Shores Rd.
City-St-Zip: TAVARES, FL 32778

Title: V () Delete
Name: PUGH, HARRY D
Address: 1409 Chichester St
City-St-Zip: ORLANDO, FL 32803

Title: T () Delete
Name: BAGWELL, JAMES L
Address: 710 Ashgrove Terr.
City-St-Zip: SANFORD, FL 32771

Title: S () Delete
Name: PUGH, HARRY D
Address: 1409 Chichester St.
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: BAGWELL, JAMES L
Address: 8626 Spikerush Ct.
City-St-Zip: SANFORD, FL 32771

Title: () Change () Addition
Name:
Address:
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: JAMES L. BAGWELL

TREA

03/18/2008

Electronic Signature of Signing Officer or Director

Date