

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L00054

FILED
Jan 16, 2009
Secretary of State

Entity Name: PARAMOUNT MILLER GRAPHICS, INC.

Current Principal Place of Business:

5299 ST AUGUSTINE RD
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

5299 ST AUGUSTINE RD
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: 59-2962266

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSTRICH, ROBERT J
5299 ST AUGUSTINE RD
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

STEVENS, AMANDA M
5299 ST AUGUSTINE RD
JACKSONVILLE, FL 32207 US

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: AMANDA STEVENS

01/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CUMMINS, JON
Address: 5299 ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL 32207

Title: DC () Delete
Name: WALTHER, FREDERICK S,
Address: 5299 ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL

Title: DV () Delete
Name: WALTHER, MICHAEL J,
Address: 5299 ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL

Title: DV () Delete
Name: WALTHER, JOHN J,
Address: 5299 ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: ROBBINS, GEORGE
Address: 12560 MANDARIN RD
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: STEIN, ROBERT L,
Address: 121 W FORSYTH ST #200
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JON CUMMINS

P

01/16/2009

Electronic Signature of Signing Officer or Director

Date