

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013411

Entity Name: MILROSE, LLC

FILED
Jul 18, 2006
Secretary of State

Current Principal Place of Business:

1702 S. WASHINGTON AVE.
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 23
CAPE CANAVERAL, FL 32920

New Mailing Address:

FEI Number: 20-0667664 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

EVANS, JOHN H ESQUIRE
1702 S. WASHINGTON AVE.
TITUSVILLE, FL 32780 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MILLIKEN, LLOYD R
Address: 300 SYKES CREEK PKWY. #805
City-St-Zip: MERRITT ISLAND, FL 32952

Title: MGR () Delete
Name: SOLANO, RHODA
Address: 1850 HARBOR POINT DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

Title: MGR () Delete
Name: ROSE, DEL
Address: P.O. BOX 23
City-St-Zip: CAPE CANAVERAL, FL 32920

ADDITIONS/CHANGES:

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DEL ROSE

MGR

07/18/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date