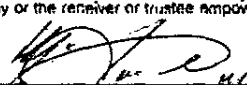


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT****FILED**
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000038528		
1. Entity Name MILLER FAMILY, LLC		
Principal Place of Business 3898 GOLDEN MEADOW COURT OVIEDO, FL 32765		Mailing Address 3898 GOLDEN MEADOW COURT OVIEDO, FL 32765
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent TUCKER, I. MICHAEL ESQ. 498 PALM SPRING DRIVE SUITE 101 OVIEDO, FL 32765		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and title is acceptable (NOT if Registered Agent signature required when retitling) DATE		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MILLER, JAVIER 3898 GOLDEN MEADOW COURT OVIEDO, FL 32765	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MILLER, MARIA L 3898 GOLDEN MEADOW COURT OVIEDO, FL 32765	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  4/19/06 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DATE Custom Phone #		



04192006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

56-2463008

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$5.00 Additional
Fee RequiredL000000532905
05/06/06-80102-L004 SU 001