

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000009776

Entity Name: MILLER AND MILLER, LLC

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

26307 CLARKSTON DRIVE  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

10337 HERITAGE BAY BLVD UNIT 1838  
NAPLES, FL 34120

**Current Mailing Address:**

26307 CLARKSTON DRIVE  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

10337 HERITAGE BAY BLVD UNIT 1838  
NAPLES, FL 34120

FEI Number: 20-1505253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MILLER, MAUREEN A  
26307 CLARKSTON DRIVE  
BONITA SPRINGS, FL 34135 US

**Name and Address of New Registered Agent:**

MILLER, MAUREEN A  
10337 HERITAGE BAY BLVD UNIT 1838  
NAPLES, FL 34120 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:

04/25/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MILLER, MAUREEN A  
Address: 10337 HERITAGE BAY BLVD UNIT 1838  
City-St-Zip: NAPLES, FL 34120

Title: MGRM  
Name: MILLER, S. ROBERT  
Address: 10337 HERITAGE BAY BLVD UNIT 1838  
City-St-Zip: NAPLES, FL 34120

I hereby 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: MAUREEN A MILLER

MRS.

04/25/2011

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