

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000100549

Entity Name: MILLAN ENTERPRISE, LLC

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

2518 PARSONS POND CIRCLE
KISSIMMEE, FL 34743

New Principal Place of Business:

Current Mailing Address:

2518 PARSONS POND CIRCLE
KISSIMMEE, FL 34743

New Mailing Address:

FEI Number: 26-1170468

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MILLAN, TIMOTHY B
2518 PARSONS POND CIRCLE
KISSIMMEE, FL 34743 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MILLAN, TIMOTHY B
Address: 2518 PARSONS POND CIRCLE
City-St-Zip: KISSIMMEE, FL 34743

Title: MGRM () Delete
Name: MILLAN, WESLEY R
Address: 2518 PARSONS POND CIRCLE
City-St-Zip: KISSIMMEE, FL 34743

Title: MGR (X) Delete
Name: VINCENTY, ZULAY
Address: 13002 CALABAY CT
City-St-Zip: CLERMONT, FL 34711

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 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: TIMOTHY MILLAN

MGRM

04/14/2009

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