FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L19811

(3)

RON MILLER AND ASSOCIATES, INC.

(3

FILED Apr 15 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address		-	n skatinali ami filata imak ibink senat bibi dinah dinah dinah dinah dinah dinah dinah dinah dinah idah
402 SEARS AVENUE N.E.		402 SEARS AVENUE N.E.			
WINTER HAVEN FL 33881		WINTER HAVEN FL 33881			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					09/29/1989
2. Principal P	lace of Business	2a. Mailing Address		-	4. FEI Number Applied For
21		26			59-297 1635 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			S Certificate of Status Desired S8.75 Additional
22		27		•,•	Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
Zip	Country	28 Zip	Countr	~	Trust Fund Contribution Added to Fees
24	25	F-1 ⊢	.ol	У	a. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ✓ Ses No
=7	p. Name and Address of Currer		1		10. Name and Address of New Registered Agent
SH	MMERLIN, ROY C.		8	Name	
146 AVE. B, N.W. WINTER HAVEN FL 33881			8:	Clean	Address (D.O. Day Number is Net Associable)
			6.	Siree!	Address (P.O. Box Number is Not Acceptable)
			83	3	
1			84	City	■■ 85 Zip Code
				1	FL 1
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
12.	OFFICERS AN		13.	Jon signatur	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPV	DELETE	1.1 TOTLE		Change Addition
NAME	MILLER, H. RON		1.2 NAME		
STREET ADDRESS	402 SEARS AVE., N.E.		1.3 STREE	T ADDRESS	
CITY-ST-ZIP	_WINTER HAVEN FL		1.4 CITY-	ST-ZiP	
TITLE	ST	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MILLER, H. RON		2.2 NAME		
STREET ADDRESS	402 SEARS AVE., N.E.		2.3 STREE	T ADDRESS	
CITY-ST-ZIP			2.4 CITY	ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS				T ADDRESS	1
CITY-ST-ZIP TITLE		DELETE	3.4. CITY -	S1 - ZIP	Change Addition
NAME		- Preside	4. 2 NAME	:	CHANGE CANONION
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP			4.4 CITY-	_	
TITLE		DELETE	5.1 TITLE	U. <u>24</u>	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			i .	T ADDRESS	
CITY-ST-ZIP			5.4 CITY -		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STAEE	T ADDRESS	
			=		1

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 13 if changed, or on an attachmentwith an address.

SIGNATURE: N. RONALD Miller 4/8/98 941)293-2691

RE034 (10/97)