


**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 07, 2003 8:00 am
Secretary of State

05-07-2003 90139 002 ****61.25

DOCUMENT #	N01000008183	
1. Entity Name	REUBEN & EMILY MILLER (REM) COMMUNITY DEVELOPMENT, INC.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4015 North US 1 North Suite, Apt. #, etc.	4015 North US 1 North Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State	City & State	4. FEI Number	Applied For
Cocoa, FL	Cocoa, FL	59-3597421	Not Applicable
Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
32927	USA	<input type="checkbox"/>	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name	Ouan L. Miller
Street Address (P.O. Box Number is Not Acceptable)	
City	4015 North US 1 North
State	FL
Zip Code	32927

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  **Ouan L. Miller** **May 1, 2003**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

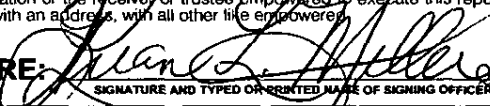
Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	Quan L. Miller Pres/Dir	TITLE	
NAME	1438 Victoria Blvd	NAME	
STREET ADDRESS	Rockledge, FL 32955	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	Priscilla Miller-Jones	TITLE	
NAME	5551 Spring Lake Terrace	NAME	
STREET ADDRESS	Boynton Bch, FL 33437	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	Aston D. Miller Treas/Dir	TITLE	
NAME	12964 75th Lane North	NAME	
STREET ADDRESS	West Palm Bch, FL 33412	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	Carolyn A. Miller Director	TITLE	
NAME	1129 21st Street	NAME	
STREET ADDRESS	West Palm Bch, FL 33407	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	Benjamin F. Miller Director	TITLE	
NAME	550 NW 21st Court	NAME	
STREET ADDRESS	Pompano Beach, FL 33060	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	Cedric K. Miller Director	TITLE	
NAME	570 Liberty Via	NAME	
STREET ADDRESS	Christianburg, VA 24073	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Ouan L. Miller** **May 1, 2003** **(321) 693-5355**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037B (12/02)