

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010295

FILED
Apr 27, 2004
Secretary of State**Entity Name:** MILLER ESTATES HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**6161 MILLER RD
MIAMI, FL 33155**New Principal Place of Business:****Current Mailing Address:**6161 MILLER RD
MIAMI, FL 33155**New Mailing Address:****FEI Number:** **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SORDO, CESAR R ESQ
3006 AVIATION AVE
SUITE 2A
COCONUT GROVE, FL 33133 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEVINE, JACK H
Address: 6161 MILLER RD
City-St-Zip: MIAMI, FL 33155

Title: V () Delete
Name: HENRY, MAUREEN
Address: 5200 SW 63RD CT
City-St-Zip: MIAMI, FL 33155

Title: V () Delete
Name: REYNAUD, BARBARA
Address: 5105 SW 63RD CT
City-St-Zip: MIAMI, FL 33155

Title: S () Delete
Name: SORDO, CESAR R
Address: 3006 AVIATION AVE SUITE 2A
City-St-Zip: COCONUT GROVE, FL 33133

Title: T () Delete
Name: RAUCHMAN, RANDIE
Address: 5210 SW 60 PLACE
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CESAR R. SORDO

SEC

04/27/2004

Electronic Signature of Signing Officer or Director

Date