

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006392

FILED  
Apr 28, 2007  
Secretary of State

Entity Name: MILLER ONE ENTERPRISES, INC.

**Current Principal Place of Business:**

3888 NE 55TH CT  
SILVER SPRINGS, FL 34489

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 2259  
SILVER SPRINGS, FL 34489

**New Mailing Address:**

FEI Number: 57-1222744

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MILLER, LUTHER JR  
3888 NE 55TH CT  
SILVER SPRINGS, FL 34489 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: BM ( ) Delete  
Name: SIMS, CALVIN  
Address: 2631 NE 10TH ST. #611  
City-St-Zip: OCALA, FL 34470

Title: BM ( ) Delete  
Name: MILLS, TANESAH  
Address: 1615 NW 20TH AVE.  
City-St-Zip: OCALA, FL 34475

Title: BM ( ) Delete  
Name: HIGH, MARGARET  
Address: 327 NW 56TH AVE.  
City-St-Zip: OCALA, FL 34470

Title: BM ( ) Delete  
Name: GERARD, DEBORAH  
Address: 1417 SE 43RD AVE  
City-St-Zip: OCALA, FL 34471

Title: BM ( ) Delete  
Name: LONG, CATHY  
Address: 6644 SE 89TH ST.  
City-St-Zip: OCALA, FL 34472

Title: BM ( ) Delete  
Name: MARK, MIQUELL  
Address: 2175 SE 79TH ST.  
City-St-Zip: OCALA, FL 34480

**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:

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 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: LUTHER MILLER

RA

04/28/2007

Electronic Signature of Signing Officer or Director

Date