

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011057

FILED  
May 18, 2009  
Secretary of State

Entity Name: MILLER MEDIA GROUP INC.

**Current Principal Place of Business:**

1777 HIGHWAY A1A SUITE 6  
SATELLITE BEACH, FL 32937

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 360807  
MELBOURNE, FL 32936

**New Mailing Address:**

FEI Number: 26-3768382      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

MILLER, GEORGE  
1777 HIGHWAY A1A SUITE 6  
SATELLITE BEACH, FL 32937      US

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: PCEO      ( ) Delete  
Name: MILLER, GEORGE  
Address: 1777 HIGHWAY A1A SUITE 6  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: VP      ( ) Delete  
Name: MILLER, CHRIS  
Address: 2066 FOXWOOD DRIVE  
City-St-Zip: MELBOURNE, FL 32937

Title: ST      ( ) Delete  
Name: JOLLY, KATHIE  
Address: 256 OLYMPIC WAY APT 11  
City-St-Zip: MELBOURNE, FL 32901

**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:

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: KATHIE JOLLY

ST

05/18/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date