

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000054173

FILED
Apr 30, 2008
Secretary of State

Entity Name: MILLENNIUM REAL PROPERTY INVESTMENTS, INC.

Current Principal Place of Business:

P.O. BOX 5363
SARASOTA, FL 34277

New Principal Place of Business:

7240 55TH AVE E
BRADENTON, FL 34203

Current Mailing Address:

P.O. BOX 5363
SARASOTA, FL 34277

New Mailing Address:

FEI Number: 65-1023673 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALVANO, WILLIAM S
1023 MANATEE AVENUE WEST
BRADENTON, FL 34205 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HRONCICH, NICHOLAS
Address: P.O. BOX 5363
City-St-Zip: SARASOTA, FL 34277

Title: DT () Delete
Name: HRONCICH, CARMEN
Address: P.O. BOX 5363
City-St-Zip: SARASOTA, FL 34277

Title: DV () Delete
Name: HRONCICH, JOHN
Address: P.O. BOX 5363
City-St-Zip: SARASOTA, FL 34277

Title: DS () Delete
Name: HRONCICH, ANTHONY
Address: P.O. BOX 5363
City-St-Zip: SARASOTA, FL 34277

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICHOLAS M HRONCICH

DP

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date