2001 UNIFORM BUSINESS REPORT (UBR)

1/19/01-!

FILED am

1. Entity Nar	IMENT # P00000 mills-custom caps, inc.	068271			Feb 08, Secreta 01-19-2001	ary o	
Principal Place of Business Mailing Address				<u> </u>	-		
499 PALERIMO ROAD PANAMA CITY FL 32405		499 PALERMO ROAD PANAMA CITY FL 32405					
					A REPORTED IN COUR DASK COURS THE COURSE COUR		1881 SERE SERE
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Number 59-3662759	 	pplied For ot Applicable	
Zip Country		Zip	Zip Country		5. Certificate of Status Desired	\$8.75 Add	ditional
	6. Name and Address of Current	Registered Agent	<u> </u>		7. Name and Address of New Registers	<u> </u>	
AMILO PERMITE				Name	•		
MILLS, JERRY P 499 PALERMO ROAD			-	Street Address	(P.O. Box Number is Not Acceptable)	-	·
PAN	IAMA CITY FL 32405		Γ				
				City		Zip Cod	le
8. The above	e named entity submits this statement fo	r the purpose of changing its	registered	office or register	red agent, or both, in the State of Florida.		
SIGNATURE	Signature, typed or printed name of registered agent	and life if applicable. (NOT	E: Registered A	gent signature required	d when reinstating) DATE	E	
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW After MAY 1, 20 Make Check Payal	X01 Fee w	ill be \$550.00	10. Election Campaign Financing Trust Fund Contribution.	\$5.0 Added	00 May Be d to Fees
11.	OFFICERS AND		12.	<u></u>	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 11
TITLE	JERRY P. MILS	☐ Delete	TITLE			☐ Change	
NAME STREET ADDRESS	499 PALERMO RD		NAME	ADORESS			18
CITY-ST-ZIP	PANAMA C'ty FI	32405	CITY-S	8			CRZE 034 (10/00)
TITLE	SECRETARY 11	☐ Delete	TITLE			Change	□ Addition 8
NAME STREET ADDRESS	JERRY D. M: NS 499 PAIGR MO RE	•	NAME	ADORESS	•		1
CITY-ST-ZIP	DONAMA C. TY, F	1 32405	CITY-SI				
TITLE	TPARGADED	☐ Delete	TITLE			☐ Change	Addition
NAME ETRECT ADDRESS	JERRY P. Mills		NAME	ADDRESS .	-		
STREET ADDRESS CITY-ST-ZIP	PANAMA C. ty, F	1 32405	CITY-ST	ADDRESS ZIP			
TITLE	7,7,7	☐ Delete	TIPLE			☐ Change	Addition
- NAME -	•	•	- E - NAME				
STREET ADDRESS CITY - ST - ZIP			CITY-ST	ADDRESS - ZIP			
TITLE	•	☐ Delete	TITLE			☐ Change	Addition
NAME STREET ADDRESS			NAME	ADDRESS			
CITY - ST- ZIP	,		CITY-ST	ľ	•		
TITLE		☐ Delete	TITLE			☐ Change	Addition
NAME STREET ADDRESSE			NAME				
STREET ADDRESS City-St-Zip			STREET A	l l			
	L certify that the information supplied with	this filling does not qualify for			ction 119.07(3)(i), Florida Statules, Hurther co	ertify that the in	nformation

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 eath; 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

1/11/00 Date

850-265-4362