

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P00000116146

1. Entity Name  
SCOTT G. MILLER, P.A.



Principal Place of Business  
390 NORTH ORANGE AVENUE, SUITE 1100  
ORLANDO, FL 32801-4961

Mailing Address  
390 NORTH ORANGE AVENUE, SUITE 1100  
ORLANDO, FL 32801-4961

FILED

06 FEB 10 AM 11:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



02012006 No Chg-P CR2E034 (11/05) 06

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3687204

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

MILLER, SCOTT G ESQ.  
390 NORTH ORANGE AVENUE, SUITE 1100  
ORLANDO, FL 32801-4961

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fee

02/24/06--01012--011 \*\*150.00

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PST  
MILLER, SCOTT G  
390 NORTH ORANGE AVE STE 1100  
ORLANDO, FL 32801

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
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STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Scott G. Miller, President*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
SCOTT G. MILLER, PRESIDENT

2/9/06

Date

407.839.4200

Daytime Phone #

B. Mitchell FEB 10 2006