

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000026518

FILED  
Apr 10, 2007  
Secretary of State

Entity Name: MILLENNIUM SALES & SERVICES, INC.

**Current Principal Place of Business:**

7560 LADSON TERRACE  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

7560 LADSON TERRACE  
LAKE WORTH, FL 33467

**New Mailing Address:**

FEI Number: 65-1084117

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REEVES, TODD C  
7560 LADSON TERRACE  
LAKE WORTH, FL 33467 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: D ( ) Delete  
Name: REEVES, TODD C  
Address: 7560 LADSON TERRACE  
City-St-Zip: LAKE WORTH, FL 33467

Title: VP ( ) Delete  
Name: REEVES, CLEOANN  
Address: 7560 LADSON TERRACE  
City-St-Zip: LAKE WORTH, FL 33467

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: REEVES, HOWARD E JR.  
Address: 309 LAS PALMAS  
City-St-Zip: ROYAL PALM BEACH, FL 33411

I hereby certify that the information supplied with this filing does not qualify for the 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: CLEOANN REEVES

VP

04/10/2007

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

\_\_\_\_\_  
Date