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**FILED**  
**Sep 23, 2002 8:00 am**  
**Secretary of State**

05-19-2002 90232 016 \*\*\*150.00

**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *P01000094141*

1. Entity Name

Terry W. Miller Inc.

**DO NOT WRITE IN THIS SPACE**2. Principal Place of Business  
2405-1 US Hwy 27/441

Suite, Apt. #, etc.

3. Mailing Address  
2405-1 US Hwy 27/441

Suite, Apt. #, etc.

City & State  
Fruitland Park, FLCity & State  
Fruitland Park, FL 347314. FEI Number  
65-1141862Applied For  
Not ApplicableZip  
34731Country  
USAZip  
34731Country  
USA5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required**DO NOT WRITE  
IN THIS SPACE**

## 7. Name and Address of Current Registered Agent

Name Terry W. Miller

Street Address (P.O. Box Number is Not Acceptable)

2405-1 US Hwy 27/441

City Fruitland Park

FL

Zip Code  
34731

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.

SIGNATURE

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so. ☐  
(See criteria on back)

January 1 - May 1: Fee is \$150.00  
 After May 1, Fee is \$350.00  
 Amended UBR is \$61.25  
 Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD Miller, Terry W 2405-1 US Hwy 27/441, Fruitland Park, FL 34731	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachment

42931

TERRY W. MILLER INC.

#P010000 9444

2405-1 US Highway 27/441  
Fruitland Park, FL 34731

Phone 352-326-0600 Fax 352-326-0603

September 5, 2002

Division of Corporations

P.O. Box 1500

Tallahassee, FL 32302-1500

To Whom It May Concern,

Due to a change of mailing address the enclosed requirements were not met. Enclosed is the Uniform Business Form with my FEI number. A check for \$150.00 is not enclosed due to the fact I had already sent that fee to you previously.

Thank you for your time and consideration in this matter.

Sincerely,

*Terry W. Miller*

Terry W. Miller