

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000122195

Entity Name: MILLIKEN ENTERPRISES, INC.

FILED
Dec 22, 2009
Secretary of State

Current Principal Place of Business:

500 W COCOA BEACH CSWY
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 304
CAPE CANAVERAL, FL 32920

New Mailing Address:

500 W COCOA BEACH CSWY
COCOA BEACH, FL 32931

FEI Number: 01-0578913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLIKEN, LLOYD R
500 W COCOA BEACH CAUSEWAY
COCOA BEACH, FL 32931 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

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MILLIKEN, LLOYD
Address: 500 W COCOA BCH CSWY
City-St-Zip: COCOA BEACH, FL 32931

Title: S () Delete
Name: SOLANO, RHODA
Address: 500 W COCOA BCH CSWY
City-St-Zip: COCOA BEACH, FL 32931

Title: PRES (X) Delete
Name: MILLIKEN, TIMOTHY L
Address: 145 WEST PASCO LN
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MILLIKEN, LLOYD
Address: 500 W COCOA BCH CSWY
City-St-Zip: COCOA BEACH, FL 32931

Title: S (X) Change () Addition
Name: SOLANO BRENNAN, RHODA
Address: 500 W COCOA BCH CSWY
City-St-Zip: COCOA BEACH, FL 32931

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: LLOYD MILLIKEN

Electronic Signature of Signing Officer or Director

PRES

12/22/2009

Date