

2004  
**2003 FOR PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P02000026712**

1. Entity Name  
**STEWART-MILLER, INC.**



Principal Place of Business  
**9806 298TH ST.  
 MYAKKA CITY FL 34251**

Mailing Address  
**9806 298TH ST.  
 MYAKKA CITY FL 34251**

FILED  
 CLERK OF STATE  
 DIVISION OF CORPORATION

04 JUL 26 PM 2:33

**REINSTATEMENT 03-04**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**9806 298TH ST EAST**

**P.O. BOX 484**

City & State

City & State

**MYAKKA CITY FL**

**MYAKKA CITY FL**

Zip

Country

Zip

Country

**34251**

**USA**

**34251-0484**

**USA**

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

**11-3660785**

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MILLER, NANCY M  
 9806 298TH ST.  
 MYAKKA CITY FL 34251**

Name **JOSEPH FRANKLIN BARNES**

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

**9806 298TH ST EAST**

**MYAKKA CITY**

City

FL

Zip Code

**34251**

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

*Joseph F. Barnes*  
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**06-23-04**

DATE

**FILE NOW!!! FEE IS \$550.00  
 After September 10, 2003 Fee will be \$750.00  
 Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
 Trust Fund Contribution.

☐ **\$5.00 May Be  
 Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete  
 NAME **MILLER, NANCY M**  
 STREET ADDRESS **9806 298TH ST.**  
 CITY-ST-ZIP **MYAKKA CITY FL 34251**

TITLE **DELETED DANIEL G** ☒ Change ☐ Addition  
 NAME **Nancy M MILLER**  
 STREET ADDRESS **9806 298TH ST. EAST**  
 CITY-ST-ZIP **MYAKKA CITY FL 34251**

TITLE **D** ☒ Delete  
 NAME **STEWART, RICHARD D**  
 STREET ADDRESS **1606 BURNING TREE LANE**  
 CITY-ST-ZIP **BRANDON FL 33510**

TITLE ☐ Change ☐ Addition  
 NAME **800039527388**  
 STREET ADDRESS **07/26/04--01045--012 \*\*35.00**

TITLE **D** ☒ Delete  
 NAME **JONES, MYRTLE M**  
 STREET ADDRESS **1606 BURNING TREE LANE**  
 CITY-ST-ZIP **BRANDON FL 33510**

TITLE ☐ Change ☐ Addition  
 NAME **800039527388**  
 STREET ADDRESS **07/26/04--01045--011 \*\*300.00**

TITLE ☐ Delete  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS **800039527388**  
 CITY-ST-ZIP **07/26/04--01045--012 \*\*900.00**

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Delete  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Delete  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*Nancy M. Miller*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**06/24/04**  
 Date

**941-812-6228**  
 Daytime Phone #

CR2E034 (4/03)