

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000050933

FILED
Apr 27, 2007
Secretary of State

Entity Name: MILLER REAL ESTATE, INC.

Current Principal Place of Business:

3925 WEST HWY 30-A
SUITE B
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

3925 WEST HWY 30-A
SUITE B
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

3925 WEST HWY 30-A
SUITE G
SANTA ROSA BEACH, FL 32459

New Mailing Address:

P.O. BOX 4817
SANTA ROSA BEACH, FL 32459

FEI Number: 04-3665571 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FRANKLIN H. WATSON, PA
5365 E. CITY HWY. 30-A, SUITE 105
SEAGROVE BCH, FL 32459 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: PVTs () Delete
Name: MILLER, JERRY
Address: 3925 WEST HWY 30-A SUITE B
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVTs (X) Change () Addition
Name: MILLER, JERRY
Address: 3925 WEST HWY 30-A SUITE G
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: JERRY MILLER

PVTs

04/27/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date