


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2008 08:00 A
Secretary of State

DOCUMENT # P02000074078 1. Entity Name MONARCH MILLER INC.	
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Principal Place of Business 9208 SUGARLAND DRIVE JACKSONVILLE, FL 32256	Mailing Address 9208 SUGARLAND DRIVE JACKSONVILLE, FL 32256
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03182008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0730156	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MILLER, ROBERT A
9208 SUGARLAND DRIVE
JACKSONVILLE, FL 32256**

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILLER, ELAINE C 9208 SUGARLAND DRIVE JACKSONVILLE, FL 32256
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MILLER, ROBERT A 9208 SUGARLAND DRIVE JACKSONVILLE, FL 32256
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Robert A. Miller **ROBERT A. MILLER** 3-18-08 904-519-6688

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #