

# 2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P03000099579

1. Entity Name  
MLLM, INC.



Principal Place of Business  
2412 AVOCADO BLVD  
BUNNELL, FL 32110

Mailing Address  
2412 AVOCADO BLVD  
BUNNELL, FL 32110

FILED

04 OCT 18 PM 1:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

10122004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

11-3700221

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SCOTT, ROBERT H JR.  
338-G PARQUE DR.  
ORMOND BEACH, FL 32174

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

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 PD ☐ Delete  
NAME FREEMAN, MARION H  
STREET ADDRESS 338-G PARQUE DR.  
CITY-ST-ZIP ORMOND BEACH, FL 32174

TITLE ☒ Change ☐ Addition  
NAME 2412 Avocado Blvd.  
STREET ADDRESS Bunnell, FL 32110  
CITY-ST-ZIP

TITLE TD ☒ Delete  
NAME FREEMAN, LAURIE  
STREET ADDRESS 338-G PARQUE DR.  
CITY-ST-ZIP ORMOND BEACH, FL 32174

TITLE ☐ Change ☐ Addition  
NAME 600041939536  
STREET ADDRESS 10/18/04--01070--012 \*\*61.25  
CITY-ST-ZIP

TITLE SD ☐ Delete  
NAME D'ALBA, LARRY  
STREET ADDRESS 338-G PARQUE DR.  
CITY-ST-ZIP ORMOND BEACH, FL 32174

TITLE ☐ Change ☒ Addition  
NAME 2412 Avocado Blvd.  
STREET ADDRESS Bunnell, FL 32110  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME TD  
STREET ADDRESS D'ALBA MARCUS  
CITY-ST-ZIP 2412 AVOCADO BLVD  
BUNNELL, FL 32110

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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:

MARION H. FREEMAN PRES 10-12-04

Date

Daytime Phone #