

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 8:00 am
Secretary of State

04-12-2006 90083 013 ***150.00

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1. Entity Name
MILEY-WILLIAMS PROPERTIES, INC.



Principal Place of Business

~~6030 S FLORIDA AVE STE K~~
~~LAKELAND, FL 33813~~
1839 E EDGEWOOD DR.
LAKELAND, FL 33803

Mailing Address

~~6030 S FLORIDA AVE STE K~~
~~LAKELAND, FL 33813~~
905 WINNIE LANE
LAKELAND, FL 33813

40047188



04042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
43-2040692

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DUNLAP III, GEORGE T
245 CENTRAL AVE
BARTOW, FL 33830

**DO NOT WRITE
IN THIS SPACE**

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	WILLIAMS, KELLY V
STREET ADDRESS	905 WINNIE LANE
CITY-ST-ZIP	LAKELAND, FL 33813
TITLE	DVS
NAME	MILEY, JANET L
STREET ADDRESS	1920 E EDGEWOOD DR C-5
CITY-ST-ZIP	LAKELAND, FL 33803
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

*I recently sent a
separate letter regarding
address change - please
make a note of it.*

Thank you,

Kelly

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:

Kelly Williams

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/06

Date

863-646-0248

Daytime Phone #