2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051157

Entity Name: D. MILLER WOODWORKING, INC.

FILED Jul 08, 2006 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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5046 INDIAN MOUND ST. 30631 BETTS RD

SARASOTA, FL 34232 MYAKKA CITY, FL 34251 US

Current Mailing Address: New Mailing Address:

5046 INDIAN MOUND ST. 30631 BETTS RD

SARASOTA, FL 34232 MYAKKA CITY, FL 34251 US

FEI Number: 16-1696258 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MILLER, DAVE MILLER, DAVE 5046 INDIAN MOUND ST. MILLER, DAVE 30631 BETTS RD

SARASOTA, FL 34232 US MYAKKA CITY, FL 34251 US

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: DAVE MILLER 07/08/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 MILLER, DAVE
 Name:
 MILLER, DAVE

 Address:
 5046 INDIAN MOUND ST.
 Address:
 30631 BETTS RD

 City-St-Zip:
 SARASOTA, FL 34232
 City-St-Zip:
 MYAKKA CITY, FL 34251

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

 Name:
 MILLER, DOREEN
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 MILLER, DOREEN

 Address:
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 Address:
 30631 BETTS RD

 City-St-Zip:
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 City-St-Zip:
 MYAKKA CITY, FL 34251

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVE MILLER PRES 07/08/2006