

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2005 8:00 am
Secretary of State

04-12-2005 90131 001 ***150.00

DOCUMENT # P04000122448 1. Entity Name MILLER TRADING COMPANY, INC.					
Principal Place of Business 574 GOLDEN LINKS DRIVE ORANGE PARK, FL 32073 US			Mailing Address 574 GOLDEN LINKS DRIVE ORANGE PARK, FL 32073 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CONNER, STEVEN W 1106 P ARK AVENUE ORANGE PARK, FL 32073				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 reissuing) _____ DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P. MILLER, WILMA C <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	574 GOLDEN LINKS DRIVE			NAME	
STREET ADDRESS	ORANGE PARK, FL 32073			STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE	VP MILLER, WILMA C <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	574 GOLDEN LINKS DRIVE			NAME	
STREET ADDRESS	ORANGE PARK, FL 32073			STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE	SEC MILLER, WILMA C <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	574 GOLDEN LINKS DRIVE			NAME	
STREET ADDRESS	ORANGE PARK, FL 32073			STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE	TREA MILLER, WILMA C <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	574 GOLDEN LINKS DRIVE			NAME	
STREET ADDRESS	ORANGE PARK, FL 32073			STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				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: <i>Wilma C. Miller</i> WILMA C. MILLER				Date: 4/03/05 904-272-5493	

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03282005 Chg-P CR2E034 (10/03)

4. FEI Number **20-1531051 (EIN)** Applied For Not Applicable

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

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