

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000116613

FILED  
May 14, 2007  
Secretary of State

Entity Name: BRICE MILLER CONSTRUCTION, INC.

**Current Principal Place of Business:**

33402 IRONGATE DR.  
LEESBURG, FL 34788

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 358503  
GAINESVILLE, FL 326358503

**New Mailing Address:**

FEI Number: 20-4987347

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MILLER, BARBARA A  
4915 NW 43RD STREET  
GAINESVILLE, FL 32606 US

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

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: \_\_\_\_\_

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:**

Title: P/S ( ) Delete  
Name: MILLER, BRICE R  
Address: 33402 IRONGATE DR.  
City-St-Zip: LEESBURG, FL 34788

Title: VP ( ) Delete  
Name: MILLER, MARCELA  
Address: 33403 IRONGATE DR.  
City-St-Zip: GAINESVILLE, FL 34788

Title: T ( ) Delete  
Name: MILLER, BARBARA A  
Address: 2509 BIRNAM WOODS WAY  
City-St-Zip: GAINESVILLE, FL 32605

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: BRICE MILLER

P/S

05/14/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date