## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## ANNUAL REPORT DOCUMENT # P05000142214 1. Entity Name DW MILLER REALTY, INC.



FILED Jan 12, 2007 08:00 AM Secretary of State

Fee Required

Principal Place of Business

413 W 13TH ST SANFORD, FL 32771 Mailing Address

413 W 13TH ST SANFORD, FL 32771



## DO NOT WRITE IN THIS SPACE

01042007 N	CR2E034 (11/05)			
4. FEI Number				Applied For
20-3653756				Not Applicable
5. Certificate of Sta	Certificate of Status Desired		\$8.75 Additional	

6. Name and Address of Current Registered Agent

FIEDLER, TIMOTHY R ESQUIRE 217 E PLYMOUTH AVE DELAND, FL 32724

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plans of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	if anniheable (NOTE: Registered	Agent planstur	required when reinstalling)	DATE
FiL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-SI-ZIP	PS MILLER, DIRK W 923 CRITTENDEN ORANGE CITY, FL 32763				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP T MILLER, WILLIAM P 2555 S. ATLANTIC AVE, #1707 DAYTONA BEACH SHORES, FL 321	18			U00000584573 01/12/07-80042-024 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE					

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:

NAME STREET ADDRESS City-St-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DIRK W. Miller

19/07

407-321-4476

Daytime Phone #