## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000033078

Entity Name: BRUCE R. MILLER, P.A.

FILED Mar 04, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

484 3RD AVE S 745 W LAKE DRIVE NAPLES, FL 34102 NAPLES, FL 34102

**Current Mailing Address: New Mailing Address:** 

484 3RD AVE S 745 W LAKE DRIVE NAPLES, FL 34102 NAPLES, FL 34102

FEI Number: 59-3842034 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:

WILSON, GARY K ESQ MILLER, BRUCE R 5801 PELICAN BAY BLVD SUITE 300 745 W LAKE DRIVE US NAPLES, FL 34108 NAPLES, FL 34102

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: BRUCE R. MILLER 03/04/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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## **OFFICERS AND DIRECTORS:** PRFS

DIR

SEC

TREA

MILLER, BRUCE R

NAPLES, FL 34102

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City-St-Zip:

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Address:

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRFS (X) Change ( ) Addition

Name: MILLER, BRUCE R 745 W LAKE DRIVE Address: City-St-Zip: NAPLES, FL 34102

Title: (X) Change ( ) Addition

Name: MILLER, BRUCE R 745 W LAKE DRIVE Address: NAPLES, FL 34102 City-St-Zip:

Title: (X) Change ( ) Addition SEC

MILLER, BRUCE R Name: 745 W LAKE DRIVE Address: City-St-Zip: NAPLES, FL 34102

Title: **TREA** (X) Change ( ) Addition

MILLER, BRUCE R Name: Address: 745 W LAKE DRIVE City-St-Zip: NAPLES, FL 34102

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: BRUCE R. MILLER **PRES** 03/04/2009