

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000014114

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Entity Name:** MILLER CONSULTING FAMILY & BUSINESS PRACTICES INC

**Current Principal Place of Business:**

17123 RICH JO CIR  
LUTZ, FL 33548

**New Principal Place of Business:**

17735 ESPRIT DR  
TAMPA, FL 33647

**Current Mailing Address:**

17735 ESPRIT DR  
TAMPA, FL 33647

**New Mailing Address:**

**FEI Number:** 26-1921952

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MILLER, KELLY D  
17735 ESPRIT DR  
TAMPA, FL 33647 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MILLER, CECILIA  
Address: 17123 RICH JO CIRCLE  
City-St-Zip: LUTZ, FL 33548 US

Title: VP  
Name: GOODWIN, TONYA  
Address: 17119 RICH JO CIRCLE  
City-St-Zip: LUTZ, FL 33548 US

Title: VP  
Name: MILLER, KELLY D  
Address: 17735 ESPRIT DRIVE  
City-St-Zip: TAMPA, FL 33647 US

I hereby 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 all other like empowered.

SIGNATURE: KELLY D MILLER

VP

02/28/2011

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

\_\_\_\_\_  
Date