

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000022282 (5)

1. Corporation Name

MILLER & FORBES, A PROFESSIONAL ASSOCIATION



Principal Place of Business

319 CLEMATIS ST
SUITE 214 THE COMEAU BLDG
WEST PALM BEACH FL 33401

Mailing Address

319 CLEMATIS ST
SUITE 214 THE COMEAU BLDG
WEST PALM BEACH FL 33401

3. Date Incorporated or Qualified
03/23/1994

3a. Date of Last Report
04/25/1995

2. Principal Place of Business

21 11382 Prosperity Farms Rd

Suite, Apt., #, etc.

22 Suite 227

City & State

23 Palm Beach Gardens

Zip

24 33410

Country

25 Palm Beach

2a. Mailing Address

26 11382 Prosperity Farms Rd

Suite, Apt., #, etc.

27 Suite 227

City & State

28 Palm Beach

Zip

29 33410

Country

30 Palm Beach

4. FEI Number

65-0502306

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

MILLER, MORRIS G
319 CLEMATIS ST
SUITE 214 THE COMEAU BLDG
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

11382 Prosperity Farms Road

83

Suite 227

84 City

Palm Beach Gardens

FL

85 Zip Code

33410

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D
MILLER, MORRIS G
STREET ADDRESS 319 CLEMATIS ST SUITE 214-
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE ☐ DELETE

NAME D
FORBES, PHILIP H
STREET ADDRESS 6405 WOOD LAKE RD-
CITY-ST-ZIP JUPITER FL 33458

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

11382 Prosperity Farms Road, Suite 227
Palm Beach Gardens, FL 33410

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

11382 Prosperity Farms Road, Suite 227
Palm Beach Gardens, FL 33410

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Morris G Miller, Director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 8, 1996
Date

407-625-1600
Daytime Phone #

CR2E034 (12/95)