

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 # P94000088049 (9)

1. Corporation Name

MILLENNIUM MARKETING, INC.



Principal Place of Business

2020 KINGSBRIDGE COURT  
TALLAHASSEE FL 32301

Mailing Address

2020 KINGSBRIDGE COURT  
TALLAHASSEE FL 32301

3. Date Incorporated or Qualified  
12/06/1994

3a. Date of Last Report  
06/27/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number  
59-3282435

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

10. Name and Address of New Registered Agent

ROCCANTI, RICHARD J  
2020 KINGSBRIDGE COURT  
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

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 the filer, if applicable

(NOTE: Registered Agent signature required when re-statuting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME ROCCANTI, RICHARD J  
STREET ADDRESS 2020 KINGSBRIDGE COURT  
CITY - ST - ZIP TALLAHASSEE FL 32301

1.1 TITLE D/P ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

TITLE D ☐ DELETE  
NAME METZKE, STEVEN T  
STREET ADDRESS P.O. BOX 6051 N/A  
CITY - ST - ZIP TALLAHASSEE FL 32314

2.1 TITLE D/P ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

TITLE D ☐ DELETE  
NAME ROSS, ROBERT H  
STREET ADDRESS P.O. BOX 38023 N/A  
CITY - ST - ZIP TALLAHASSEE FL 32315

3.1 TITLE D/T ☒ Change ☐ Addition  
3.2 NAME HUGH OWEN  
3.3 STREET ADDRESS 2222 Demeron Rd.  
3.4 CITY - ST - ZIP TALLAHASSEE, FL 32312

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

4.1 TITLE D ☐ Change ☒ Addition  
4.2 NAME BILL LICKSON  
4.3 STREET ADDRESS 274 E. Rosehill Dr.  
4.4 CITY - ST - ZIP TALLAHASSEE, FL 32312

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
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 amendment with an address.

SIGNATURE:

*Richard J. Roccati*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96

877-8703

Date

Daytime Phone #

CR2E034 (12/95)