

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 25, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # P95000028083**

1. Entity Name

MILLER, SOUTH & MILHAUSEN, P.A.



Principal Place of Business

1000 LEGION PLACE, SUITE 1200  
ORLANDO, FL 32801 US

Mailing Address

1000 LEGION PLACE, SUITE 1200  
ORLANDO, FL 32801 US



04132007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

59-3307110

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

MILLER, J. GARY  
1000 LEGION PLACE, SUITE 1200  
ORLANDO, FL 32801

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U000000730138

05/08/07-80066-021 158.75

10. OFFICERS AND DIRECTORS

TITLE P  
NAME MILLER, J. GARY  
STREET ADDRESS 571 NORTH LAKE SYBELIA DRIVE  
CITY-ST-ZIP MAITLAND, FL 32751

TITLE VPST  
NAME SOUTH, J TODD  
STREET ADDRESS 8 PINE ST.  
CITY-ST-ZIP WINDERMERE, FL 34786

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
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CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J. GARY MILLER, PRESIDENT

4/16/07

Date

407-539-1638

Daytime Phone #