

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 27, 2008 08:00 AM
Secretary of State

DOCUMENT # P95000050437

1. Entity Name

MILLER EINHOUSE RYMER & BOYD, INC.



Principal Place of Business

5323 MILLENIA LAKES BLVD
SUITE 220
ORLANDO, FL 32839 US

Mailing Address

5323 MILLENIA LAKES BLVD
SUITE 220
ORLANDO, FL 32839 US



03242008

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3325996

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHRISTOPHER, DONALD E
390 N. ORANGE AVE., STE. 2200
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, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

U00000871925
04/10/08-80018-007 158.75

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	EINHOUSE, JEFFERY D
STREET ADDRESS	1563 LYONS CT SOUTH
CITY-ST-ZIP	OVIEDO, FL 32765
TITLE	D
NAME	RYMER, BARRY
STREET ADDRESS	1457 MONTCALM STREET
CITY-ST-ZIP	ORLANDO, FL 32806
TITLE	D
NAME	BOYD, STEVEN
STREET ADDRESS	1747 DEMETREE DR
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/24/08

Daytime Phone #