

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 # P95000075740 (7)

1. Corporation Name

MILLS-SIMPSON ENTERPRISES, INC.



Principal Place of Business

3860 IRONWOOD LANE  
SUITE 402  
BRADENTON FL 34209

Mailing Address

3860 IRONWOOD LANE  
SUITE 402  
BRADENTON FL 34209

3. Date Incorporated or Qualified

10/02/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 26 % Margaret O. Madison

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

65 0639063

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

MADISON, MARGARET  
3860 IRONWOOD LANE  
SUITE 402  
BRADENTON FL 34209

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 title if applicable.

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

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME MADISON, MARGARET  
STREET ADDRESS 3860 IRONWOOD LANE, #402  
CITY-ST-ZIP BRADENTON FL 34209

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

2.1 TITLE V  
22 NAME Robert Tocci  
23 STREET ADDRESS 440 N.E. 17th Way  
24 CITY-ST-ZIP Fort Lauderdale FL 33301

3.1 TITLE S  
32 NAME Samuel Houghton  
33 STREET ADDRESS 5727 Hood Street  
34 CITY-ST-ZIP Hollywood FL 33021

4.1 TITLE T  
42 NAME R. Bruce Grinnell  
43 STREET ADDRESS 2777 Rose Hill Road  
44 CITY-ST-ZIP Marietta NY 13110

5.1 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

6.1 TITLE  
62 NAME  
63 STREET ADDRESS  
64 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:

Margaret O. Madison  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 19, 1996 (941) 794-6548  
Date Daytime Phone #

CR2E034 (12/95)