

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000030216

FILED  
Feb 19, 2002 8:00 AM  
Secretary of State

Entity Name: DAVID A. MILLER, P.A.

## Current Principal Place of Business:

207 BEGONIA DRIVE  
PAHOKEE, FL 33476 US

## New Principal Place of Business:

## Current Mailing Address:

2356 ALFORD WAY  
WELLINGTON, FL 33414

## New Mailing Address:

PO BOX 197  
PAHOKEE, FL 33476

FEI Number: 65-0714922

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILLER, DAVID A  
2356 ALFORD WAY  
WELLINGTON, FL 33414

## Name and Address of New Registered Agent:

MILLER, DAVID A MD  
2356 ALFORD WAY  
WELLINGTON, FL 33414

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.

SIGNATURE: DAVID A. MILLER MD

02/19/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: MILLER, DAVID A  
Address: 2356 ALFORD WAY  
City-St-Zip: WELLINGTON, FL 33414

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: MILLER, DAVID A MD  
Address: 2356 ALFORD WAY  
City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID A MILLER MD

DPS

02/19/2002

Electronic Signature of Signing Officer or Director

Date