

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P97000016631

1. Entity Name
D. F. MILLER LEASING COMPANY



Principal Place of Business
**1610 S 8TH ST
FERNANDINA BEACH, FL 32034**

Mailing Address
**1610 S 8TH ST
FERNANDINA BEACH, FL 32034**

DO NOT WRITE IN THIS SPACE

**FILED
Feb 27, 2006 08:00 AM
Secretary of State**



02092006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3431035	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WOOD, MARSHALL E
303 CENTRE ST, SUITE 100
FERNANDINA BEACH, FL 32034**

**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, 2006 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be
Added to Fees**

**1000000448585
03/09/06-80020-005 150.00**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MILLER, DAVID F SR
STREET ADDRESS 68 MARSH CREEK DR
CITY-ST-ZIP AMELIA ISLAND, FL 32034

TITLE VSTD
NAME MILLER, DAVID F JR
STREET ADDRESS 42 MARSH CREEK DRIVE
CITY-ST-ZIP AMELIA ISLAND, FL 32034

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 my address, with all other like empowered.

SIGNATURE

David F. Miller, Sr.

2-9-06 (904) 277-6727

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day and Phone #