

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 21, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P99000033560**

1. Entity Name  
**MILLER ENTERPRISES OF POLK COUNTY, INC.**



Principal Place of Business  
**150 GALLOWAY ROAD  
WINTER HAVEN, FL 33880**

Mailing Address  
**P O BOX 152  
EAGLE LAKE, FL 33839-0152**



03112005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-3982244**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**MILLER, GEORGE P JR.  
150 GALLOWAY RD.  
WINTER HAVEN, FL 33880**

**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, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

1000001321856  
04/21/05-80034-013 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	MILLER, GEORGE P JR.
STREET ADDRESS	150 GALLOWAY ROAD
CITY-ST-ZIP	WINTER HAVEN, FL 33880

TITLE	V
NAME	MILLER, RANDALL S
STREET ADDRESS	150 GALLOWAY ROAD
CITY-ST-ZIP	WINTER HAVEN, FL 33880

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 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 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, typed or printed name of signing officer or director

**George P. Miller Jr.** 04/01/05 863-294-2452