## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # P9900088534 Jul 20, 2000 8:00 am Secretary of State 1. Entity Name **B. JENNINGS MILLER, INC.** 07-20-2000 90025 005 \*\*\*150.00 Mailing Address Principal Place of Business 368 W. GRANADA BLVD. 368 W. GRANADA BLVD. ORMOND BEACH FL 32174 ORMOND BEACH FL 32174 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-363622 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MILLER, B. JENNINGS Street Address (P.O. Box Number is Not Acceptable) 368 W. GRANADA BLVD. ORMOND BEACH FL 32174 City Zip Code 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 Fiorida. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Change Addition TITLE Delete TITLE MILLER, B. JENNINGS NAME NAME 368 W. GRANADA BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-7IP ORMOND BEACH FL 32174 CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHTY-ST-7IE CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

July 17- 3000

Daytime Phone #



HHACKMENT DHOGGWW885341

368 W. Granada Blvd Ormond Beach, FL 32174

Phone: (904) 615-1242 FAX: (904) 615-6474

July 18, 2000

Dear Katherine Harris,

This was the first time we received the 2000 Uniform Business Report. I was not aware that this report had to be filed until we received it in the mail. Will you please wave the late fee of \$400.00 and accept our payment of \$150.00.

Thank you for your consideration in this matter.

Sincerely,

B. Jennings Miller