

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000110630

Entity Name: LORRI R. MILLER, CPA, PA

FILED
Apr 27, 2004
Secretary of State

Current Principal Place of Business:

637 BUOY LN., #302
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

15700 KIWI COURT
CLERMONT, FL 34711

Current Mailing Address:

P.O. BOX 3189
NAPLES, FL 341063189

New Mailing Address:

15700 KIWI COURT
CLERMONT, FL 34711

FEI Number: 59-3626484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, LORRI R
637 BUOY LN., #302
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

MILLER, LORRI R
15700 KIWI COURT
CLERMONT, FL 34711 US

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:

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MILLER, LORRI R
Address: 637 BUOY LN., #302
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MILLER, LORRI R
Address: 15700 KIWI COURT
City-St-Zip: CLERMONT, FL 34711

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: LORRI R. MILLER

P

04/27/2004

Electronic Signature of Signing Officer or Director

Date