

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S18257 (3)

1. Corporation Name

H. LINCOLN MILLER, JR., INC.

Principal Place of Business

773 N ST JUDES DR
PO BOX 3196
SARASOTA FL 34230
US

Mailing Address

PO BOX 3196
SARASOTA FL 34230
US



2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

MILLER JR, H LINCOLN
773 N ST JUDES DR
LONGBOAT KEY
SARASOTA FL 34228

3. Date Incorporated or Qualified

12/13/1990

3a. Date of Last Report

03/29/1995

4. FEI Number

11-2440241

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 190.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0702 and 607.1105, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0702, Florida Statutes.

SIGNATURE

Signed, dated, and sworn to before me by the above-named corporation on this day of 1996.

Date

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
MILLER, H LINCOLN, JR
773 N ST JUDES DR
SARASOTA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
MILLER, MARGARET B
773 N ST JUDES DR
SARASOTA FL

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. NAME

1. STREET ADDRESS

1. CITY-ST-ZIP

2. NAME

2. STREET ADDRESS

2. CITY-ST-ZIP

3. NAME

3. STREET ADDRESS

3. CITY-ST-ZIP

4. NAME

4. STREET ADDRESS

4. CITY-ST-ZIP

5. NAME

5. STREET ADDRESS

5. CITY-ST-ZIP

6. NAME

6. STREET ADDRESS

6. CITY-ST-ZIP

7. NAME

7. STREET ADDRESS

7. CITY-ST-ZIP

8. NAME

8. STREET ADDRESS

8. CITY-ST-ZIP

9. NAME

9. STREET ADDRESS

9. CITY-ST-ZIP

10. NAME

10. STREET ADDRESS

10. CITY-ST-ZIP

11. NAME

11. STREET ADDRESS

11. CITY-ST-ZIP

34228

☐ Change ☐ Addition

34228

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

SIGNATURE:

Margaret B Miller
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-9-96 941-955-0793
Date of Filing
Filing Fee

CR2E034 (12/95)