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May 02 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # S38141

(5)

1. Corporation Name  
MILBRO INVESTMENT COMPANY



Principal Place of Business

Mailing Address

P O BOX 808  
HIGHLAND CITY FL 33846

P O BOX 808  
HIGHLAND CITY FL 33846-0808

3. Date Incorporated or Qualified  
03/11/1991

3a. Date of Last Report  
04/10/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number  
59-3069247

Applied For  
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

24

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLER, PAUL W.  
2823 CHATSWORTH LANE  
LAKELAND FL 33813

81 Name

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

2804 Chatsworth Lane

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signer's typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME MILLER, PAUL W.  
STREET ADDRESS 2823 CHATSWORTH LANE  
CITY - ST - ZIP LAKELAND FL

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 2804 Chatsworth Lane  
1.4 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME MILLER, BJ.  
STREET ADDRESS 2810 CHATSWORTH LANE  
CITY - ST - ZIP LAKELAND FL

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 2804 Chatsworth Lane  
2.4 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME MILLER, GUY E.  
STREET ADDRESS 16430 WILSON CREEK COURT  
CITY - ST - ZIP CHESTERFIELD MO

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME MILLER, DELORES  
STREET ADDRESS 16430 WILSON CREEK COURT  
CITY - ST - ZIP CHESTERFIELD MO

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*By: Miller REBURNER*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/97

(941) 646-9342

Date

Daytime Phone #

CR2E034 (9/96)