2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # V22917 1. Entity Name MILLER AND FRIENDS, INC.

Principal Place of Business

1305 E. TREASURE COVE

GILBERT, AZ 85234 US

Mailing Address

1305 E. TREASURE COVE GILBERT, AZ 85234 US

## FILED Apr 30, 2004 08:00 AM Secretary of State



DO	NOT	WRITE	IN	THIS	SPA	CE
UU.	IVUI	WYMII E	114		OF M	

 01082004
 No Chg-P
 CR2E034 (10/03)

 4. FEI Number
 Applied For Not Applicable

 59-3123145
 Not Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

STRADER, CARL F 10442 SCOTT MILL RD. JACKSONVILLE, FL 32257

SIGNATURE:

## 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 reinstaturg) DATE.									
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution			ing	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	CTORS							
TITLE NAME STREET AUDRESS CITY-ST-ZIP	P MILLER, ATHENA 1305 E. TREASURE COVE. GILBERT, AZ 85234				500000145884 05.002774-80142-007-150.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MILLER, JOHN 1305 E. TREASURE COVE GILBERT, AZ 85234				75,7457 <del>44-856142-00</del> 17 <b>150.00</b>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				· DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					·				
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
12. I hereby certify that the information supplied with this filling 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.									