

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 341891

**Entity Name:** HANFORD & MILLER, INC.

**Current Principal Place of Business:**

1625 FLORENTINO LANE  
WINTER PARK, FL 32792

**Current Mailing Address:**

5817 GRANT FORD RD  
GAINESVILLE, GA 30506

**FEI Number:** 59-1318217

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MCCLUSKEY, ROY D  
1625 FLORENTINO LANE  
WINTER PARK, FL 32792 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name MCCLUSKEY, ROY D  
Address 429 MOUNTAIN VIEW DR.  
City-State-Zip: DAHLONEGA GA 30533

Title VP  
Name BOGGS, JUDITH A.  
Address 250 SEA DUNES DRIVE  
City-State-Zip: MELBOURNE BEACH FL 32951

Title SECRETARY  
Name MCCLUSKEY, ERIN  
Address 1625 FLORENTINO LANE  
City-State-Zip: WINTER PARK FL 32792

Title PRESIDENT  
Name CLEMMONS, MARCIA  
Address 5817 GRANT FORD ROAD  
City-State-Zip: GAINESVILLE GA 30506

Title TREASURER  
Name MCCLUSKEY, SANDRA  
Address 429 MOUNTAIN VIEW DR.  
City-State-Zip: DAHLONEGA GA 30533

Title DIRECTOR  
Name CLEMMONS, KATHY  
Address 5817 GRANT FORD RD  
City-State-Zip: GAINESVILLE GA 30506

*I hereby 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 all other like empowered.*

**SIGNATURE:** MARCIA CLEMMONS

**PRESIDENT**

**02/11/2019**

Electronic Signature of Signing Officer/Director Detail

Date