

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L81403

**Entity Name:** MICHAEL J. MILLWARD, C.P.A., P.A.

**Current Principal Place of Business:**

3612 NE 5TH TERRACE  
BOCA RATON, FL 33431

**Current Mailing Address:**

P.O. BOX 1811  
BOCA RATON, FL 33429-1811 US

**FEI Number:** 65-0192940

**Certificate of Status Desired:** No

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

MILLWARD, MICHAEL J.  
3612 NE 5TH TERRACE  
BOCA RATON, FL 33431 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 P  
Name MILLWARD, MICHAEL J.  
Address P.O. BOX 1811  
City-State-Zip: BOCA RATON FL 33429-1811

*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:** MICHAEL MILLWARD

**PRESIDENT**

**03/20/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date