

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000039061

**Entity Name:** LOUIS MCMILLIAN P.A.

**Current Principal Place of Business:**

4529 SW 1 ST  
MIAMI, FL 33134

**FILED**  
**Feb 25, 2014**  
**Secretary of State**  
**CC9797932756**

**Current Mailing Address:**

4529 SW 1 ST  
MIAMI, FL 33134 US

**FEI Number: 26-4795606**

**Certificate of Status Desired: No**

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

MCMILLIAN, LOUIS S  
4529 SW 1 ST  
MIAMI, FL 33134 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	Title	VP
Name	MCMILLIAN, LOUIS S	Name	MCMILLIAN, SARAH L
Address	4529 SW 1 ST	Address	4529 SW 1 ST
City-State-Zip:	MIAMI FL 33134	City-State-Zip:	MIAMI FL 33134

*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: LOUIS MCMILLIAN**

**PRESIDENT**

**02/25/2014**

Electronic Signature of Signing Officer/Director Detail

Date