

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000028052

**Entity Name:** NORMAN MILLER DESIGN, LLC

**Current Principal Place of Business:**

314 E MAXWELL ST  
LAKELAND, FL 33803

**Current Mailing Address:**

314 E MAXWELL ST  
LAKELAND, FL 33803 US

**FEI Number:** 83-3418131

**Certificate of Status Desired:** Yes

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

MILLER, KATHLEEN W  
314 E MAXWELL ST  
LAKELAND, FL 33803 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

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	MILLER, KATHLEEN W	Name	NORMAN, PAMELA E
Address	314 E MAXWELL ST	Address	443 EUNICE DR
City-State-Zip:	LAKELAND FL 33803	City-State-Zip:	LAKELAND FL 33803

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KATHLEEN W. MILLER

**MANAGER**

**03/05/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date