2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 20, 2007
Secretary of State

DOCUMENT# P05000072265

Entity Name: MIDAS CONSTRUCTION COMPANY

Current Principal Place of Business:

62 NEVER BEND DR
OCALA, FL 34482

New Principal Place of Business:

Current Mailing Address:

62 NEVER BEND DR
OCALA, FL 34482

New Mailing Address:

FEI Number: 20-2935449 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FINKE, JEFFREY C
62 NEVER BEND DR
OCALA, FL 34482 US

Name and Address of New Registered Agent:

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: JEFFREY C. FINKE

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: CLAPPER, RONALD C
Address: 2119 HEIM HILL RD
City-St-Zip: MONTOURSVILLE, PA 17754

Title: P ( ) Delete
Name: BOWER, MAURICE
Address: 2115 HEIM HILL ROAD
City-St-Zip: MONTOURSVILLE, PA 17754

Title: VSM ( ) Delete
Name: FINKE, JEFFREY C
Address: 62 NEVER BEND DRIVE
City-St-Zip: OCALA, FL 34482

Title: VT ( ) Delete
Name: BOWER, MIKE
Address: 22 LIVERMORE ROAD
City-St-Zip: WILLIAMSPORT, PA 17701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JEFFREY C. FINKE VSM 09/20/2007

Electronic Signature of Signing Officer or Director Date