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9/4/2007-90041-017-\$150.00-\$150.00

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000120935 FILED 1. Entity Name 07 SEP 28 AH 9: 36 MID-FLORIDA ELECTRIC, INC. SCURLTARY OF STATE TALLAHASSEE, FLORIDA Mailing Address Principal Place of Business 1515 CARRINGTON AVENUE 1515 CARRINGTON AVENUE SEBRING, FL 33875 US SEBRING, FL 33875 US 🕒 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 07032007 Chg-P Applied For 4. FEI Number City & State City & State Not Applicable 20-5603081 \$8.75 Additional Country Ζiρ Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of Now Registered Agent 6. Name and Address of Current Registered Agent _ _ _ _ _ _ _ _ . . MANINT, WILLIAM J JR Street Address (P.O. Box Number is Not Acceptable) 1515 CARRINGTON AVENUE SEBRING, FL 33875 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of regretared agent and atte if applicable (NOTE: Registered Agent signature required when rematating) \$5.00 May Be 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice Due by September 14, 2007 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE Change Addition Delete MILE MANINT, WILLIAM J JR NAME MAME 1515 CARRINGTON AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SEBRING, FL 33875 CITY-ST-23P Change ☐ Addition MIE! Delete TALE KAME STREET ADDRESS STREET ADDRESS CITY - ST - ZXP CITY-ST-7IP TITLE Delete MILE ☐ Change Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZD HILL TITLE Change ☐ Addition C Deiete NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-78P ☐ Change TITLE Delete TITLE Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST- ZIP IIILE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the recovery or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE X William Many WILLIAM MA £863) 39 I - 371 MANINT JR