

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000000852

**FILED  
Apr 30, 2015  
Secretary of State  
CC2905205094**

**Entity Name:** MID-FLORIDA OFFICIALS ASSOCIATION, INC.

**Current Principal Place of Business:**

1823 SW 28TH STREET  
OCALA, FL 34471

**Current Mailing Address:**

1823 SW 28TH STREET  
OCALA, FL 34471 US

**FEI Number:** 59-3144325

**Certificate of Status Desired:** No

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

POLE, JEFFREY  
1823 SW 28TH STREET  
OCALA, FL 34471 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	TD	Title	PD
Name	POLE, JEFFREY	Name	SUMMERS, ALVIS
Address	1823 SW 28TH STREET	Address	14320 SW 45TH CIRCLE
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34478

Title	SD
Name	ADAMS, TERRI
Address	3351 SE 4TH STREET
City-State-Zip:	OCALA FL 34471

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JEFFREY POLE

**TREASURER**

**04/30/2015**

Electronic Signature of Signing Officer/Director Detail

Date