

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H87775

**Entity Name:** FLORIDA MIDDLE PROPERTIES, INC.

**Current Principal Place of Business:**

205 S. HOOVER STREET  
400  
TAMPA, FL 33609

**Current Mailing Address:**

205 S. HOOVER STREET  
400  
TAMPA, FL 33609

**FEI Number: 59-2623788**

**Certificate of Status Desired: No**

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

WILSON, J STYLES  
205 S. HOOVER STREET #400  
TAMPA, FL 33609 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           PTD  
Name           CARTER, SHIRLEY  
Address        205 S HOOVER STREET #400  
City-State-Zip: TAMPA FL 33609

Title           D  
Name           FARMER, JD  
Address        205 S HOOVER ST #400  
City-State-Zip: TAMPA FL

Title           VSD  
Name           THATCHER, CAROLYN  
Address        205 S. HOOVER STREET #400  
City-State-Zip: TAMPA FL 33609

*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: SHIRLEY A CARTER**

**PRESIDENT**

**02/26/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date