

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000087885

Entity Name: MID FLORIDA LEASE ADMINISTRATION, L.L.C.

Current Principal Place of Business:

8445 SW 80TH ST
OCALA, FL 34481

Current Mailing Address:

8445 SW 80TH ST
OCALA, FL 34481 US

FEI Number: 83-4525334

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLEN & WAGONER, P.A.
1756 N. BELCHER ROAD
CLEARWATER, FL 33756 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: GERALD R. COLEN

02/14/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name COLEN, KENNETH D
Address 1245 COURT STREET
City-State-Zip: CLEARWATER FL 33756

Title VP/S/T
Name WOOLBRIGHT, C. GUY
Address 8445 SW 80TH ST
City-State-Zip: Ocala FL 34481

Title AS
Name ORTIZ, BARBARA
Address 8445 SW 80TH ST
City-State-Zip: Ocala FL 34481

Title VP
Name BARABBA, DESSA
Address 2069 WORLD PKWY BLVD E
City-State-Zip: CLEARWATER FL 33763

Title VP
Name COLEN, LESLEE R
Address 2069 WORLD PKWY BLVD E
City-State-Zip: CLEARWATER FL 33763

Title AS
Name SORIANO, PATRICIA
Address 8445 SW 80TH ST
City-State-Zip: Ocala FL 34481

Title EXECUTIVE VP, COO
Name MASSARELLA-AIOSA, LINDA D.
Address 8445 SW 80TH STREET
City-State-Zip: Ocala FL 34481

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: PATRICIA SORIANO

ASSISTANT SECRETARY 02/14/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date