

**2021 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

04/13/2021

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

*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:** KENNETH D. COLEN

PRES

04/13/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date