

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000017237

**Entity Name:** MIDLAND FORMS, LLC

**Current Principal Place of Business:**

15671 SAN CARLOS BLVD  
STE. 101  
FORT MYERS, FL 33908

**Current Mailing Address:**

15671 SAN CARLOS BLVD  
STE. 101  
FORT MYERS, FL 33908 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ISLAND FINANCIAL SERVICES, INC.  
15671 SAN CARLOS BLVD  
STE. 101  
FORT MYERS, FL 33908 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

**Authorized Person(s) Detail :**

Title            AMBR  
Name            MIDLAND IRA, INC.  
Address        15671 SAN CARLOS BLVD  
                  STE. 101  
City-State-Zip: FORT MYERS FL 33908

Title            MGR  
Name            MIDLAND IRA, INC.  
Address        15671 SAN CARLOS BLVD  
                  STE. 101  
City-State-Zip: FORT MYERS FL 33908

*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:** DAVID OWENS

**PRESIDENT**

**01/24/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date