

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2004 08:00 AM
Secretary of State

DOCUMENT # 467124	
1. Entity Name MID-STATE MACHINE AND FABRICATING CORPORATION	

Principal Place of Business 2730 MINE & MILL ROAD LAKELAND, FL 33801 US	Mailing Address 2730 MINE & MILL ROAD LAKELAND, FL 33801 US
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DO NOT WRITE IN THIS SPACE



02112004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1639133	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent KERSEY, HAL E 3503 KING ROAD WINTER HAVEN, FL 33880

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U000000106513 04/08/04-800117-023 158.75
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD KERSEY, HAROLD E 2730 MINE & MILL ROAD LAKELAND, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S DOWDICAN, DOREEN 2730 MINE & MILL RD. LAKELAND, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD TINDELL, DAVE 2730 MINE & MILL RD LAKELAND, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD KERSEY, LAURA 2730 MINE & MILL ROAD LAKELAND, FL 33801
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other I am empowered.

SIGNATURE: <u>Doreen Dowdican</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<u>4-6-04</u> Date	<u>8636656233</u> Daytime Phone #
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