

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # 467124 1. Entity Name MID-STATE MACHINE AND FABRICATING CORPORATION	
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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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03292005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1639133	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

KERSEY, HAL E
2730 MINE & MILL ROAD
LAKELAND, FL 33801

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

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	
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05/03/05-80120-022 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 like empowered.

SIGNATURE: *Noreen Dowdic*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-05
Date Daytime Phone #