

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # F93000000951 (4)

1. Corporation Name

MID FLORIDA CONTRACTING, INC.

96 MAY -3 AM 9: 11



Principal Place of Business

201 COLUMBIA ROAD
VALLEY CITY OH 44280

Mailing Address

201 COLUMBIA ROAD
VALLEY CITY OH 44280

3. Date Incorporated or Qualified

03/05/1993

3a. Date of Last Report

03/23/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

34-1048591

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KNOTTS, GREGORY
1202 DEER LAKE CIRCLE
APOKA FL 32712

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CP	<input type="checkbox"/> DELETE
NAME	KNOTTS, SARAH	
STREET ADDRESS	1202 DEER LAKE CIRCLE	
CITY- ST- ZIP	APOKA FL	
TITLE	VCST	<input type="checkbox"/> DELETE
NAME	NESPECA, BETSY	
STREET ADDRESS	7561 AVON LAKE RD	
CITY- ST- ZIP	LODI OH	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MACK, DOUGLAS	
STREET ADDRESS	1229 W. RIVER ROAD	
CITY- ST- ZIP	VALLEY CITY OH	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MACK, EMILY	
STREET ADDRESS	1229 W. RIVER ROAD	
CITY- ST- ZIP	VALLEY CITY OH	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	MACK, HOWARD	
STREET ADDRESS	1229 W RIVER RD	
CITY- ST- ZIP	VALLEY CITY OH	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

600001816736
-05/10/96--01055--002
****200.00 ****200.00

311 MAY 10 1996

SIGNATURE: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)