

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G68854

FILED
Apr 16, 2009
Secretary of State

Entity Name: MID-FLORIDA WAREHOUSING, INC.

Current Principal Place of Business:

365 TAFT VINELAND RD.
SUITE 105
ORLANDO, FL 32824 US

New Principal Place of Business:

Current Mailing Address:

365 TAFT VINELAND RD.
SUITE 105
ORLANDO, FL 32824 US

New Mailing Address:

FEI Number: 59-2343525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHALIFAU, DEBBIE R
365 TAFT-VINELAND RD
SUITE 105
ORLANDO, FL 32824 US

Name and Address of New Registered Agent:

CHALIFOUX, DEBBE R
365 TAFT-VINELAND RD
SUITE 105
ORLANDO, FL 32824 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: DEBBE R. CHALIFOUX

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RUSSELL, JOHN H
Address: 365 TAFT-VINELAND RD #105
City-St-Zip: ORLANDO, FL 32824

Title: VP () Delete
Name: RUSSELL, JOHN B
Address: 2645 CHEROKEE RD.
City-St-Zip: SAINT CLOUD, FL 34772

Title: VP () Delete
Name: MADISON, PETE
Address: 4908 OAK ISLAND RD.
City-St-Zip: ORLANDO, FL 32809

Title: ST () Delete
Name: CHALIFAU, DEBBIE R
Address: 6105 LAKE LIZZIE DR
City-St-Zip: SAINT CLOUD, FL 34771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: CHALIFOUX, DEBBE R
Address: 6105 LAKE LIZZIE DR
City-St-Zip: SAINT CLOUD, FL 34771

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBBE R. CHALIFOUX

ST

04/16/2009

Electronic Signature of Signing Officer or Director

Date