

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G79418

**FILED**  
**Feb 26, 2010**  
**Secretary of State**

**Entity Name:** MID AMERICA DRILLING EQUIPMENT, INC.

**Current Principal Place of Business:**

5801 SW 6TH PLACE  
OCALA, FL 34474 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 770565  
OCALA, FL 344770565 US

**New Mailing Address:**

**FEI Number:** 59-2398346

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, JOSEPH E.  
280 EAST HATHAWAY AVENUE  
BRONSON, FL 32621 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** OWENS, G. RONALD  
**Address:** 5801 SW 6TH PLACE  
**City-St-Zip:** Ocala, FL 34474

**Title:** ST  
**Name:** OWENS, NANCY  
**Address:** 5801 SW 6TH PLACE  
**City-St-Zip:** Ocala, FL 34474

**Title:** VP  
**Name:** WOOD, DONALD S.  
**Address:** 5801 SW 6TH PLACE  
**City-St-Zip:** Ocala, FL 34474

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 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 all other like empowered.

**SIGNATURE:** NANCY OWENS

ST

02/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date