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APPROVED AND FILED

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



STATE DEPARTMENT OF STATE
Barbara B. Menthum
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G80454 (3)

**1. CORPORATION NAME
MFM INDUSTRIES, INC.**

**Principal Place of Business Mailing Address
3300 S.W. 34TH AVE #152 3300 S.W. 34TH AVE #152
OCALA FL 34474-1487 Ocala FL 34474-1487**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 01/25/1984 3a. Date of Last Report 03/18/1994

2. Principal Place of Business 2a. Mailing Address

21 State, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 34474-4487 25 Country 29 34474-4487 30 Country

4. FEI Number 59-2473569 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

**WILKINSON, MICHAEL
3300 SW 34TH AVE. STE. 152
OCALA FL 34474**

10. Name and Address of New Registered Agent

**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

(Print name of person who signed and the person's title and the date if applicable)

(NOTE: Registered Agent Signature Required when Resigning)

DATE

12. OFFICERS AND DIRECTORS

**11.1 TITLE CPD
11.2 NAME PALMER, W.M., JR.
11.3 STREET ADDRESS 3080 SW 53RD ST
11.4 CITY - ST - ZIP Ocala FL**

**11.1 TITLE D
11.2 NAME EDGAR, ALLEN C.
11.3 STREET ADDRESS 2506 SW 9TH DRIVE
11.4 CITY - ST - ZIP GAINESVILLE FL**

**11.1 TITLE D
11.2 NAME PALMER, MARGARET
11.3 STREET ADDRESS 1318 S.E. 8TH ST.
11.4 CITY - ST - ZIP Ocala FL**

**11.1 TITLE D
11.2 NAME MUTSCHLER, JOHN G.
11.3 STREET ADDRESS 1212 W. 96TH ST., #2B
11.4 CITY - ST - ZIP BLOOMINGTON MN**

**11.1 TITLE S
11.2 NAME GLANZER, DOROTHY
11.3 STREET ADDRESS 4220 SW 5TH AVENUE
11.4 CITY - ST - ZIP Ocala FL**

**11.1 TITLE TD
11.2 NAME WILKINSON, MICHAEL W.
11.3 STREET ADDRESS 5155 SE 44TH AVE., RD.
11.4 CITY - ST - ZIP Ocala FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE Controller Change Addition

**13.2 NAME Harvey Radford
13.3 STREET ADDRESS 2821 SW 36th Drive
13.4 CITY - ST - ZIP Ocala, FL 34474**

13.1 TITLE Change Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY - ST - ZIP

13.1 TITLE Change Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY - ST - ZIP

13.1 TITLE Change Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY - ST - ZIP

13.1 TITLE Change Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY - ST - ZIP

14. I certify, on behalf of the corporation, that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption of liability for the corporation's officers and directors under Florida Statutes. I further certify that the officers and directors of the corporation are not providing any supplemental information to the public and are not liable for the corporation's officers and directors under Florida Statutes. I further certify that I am not the owner of the corporation and that I am not the registered agent of the corporation. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, and that my name is not on the list of officers and directors of the corporation.