2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G91111

Entity Name: MID-STATE ENGINEERS & ASSOCIATES, INC.

FILED Jan 11, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

347 BOLLENDER ROAD AUBURNDALE, FL 33823 US 347 BOLENDER ROAD AUBURNDALE, FL 33823

Current Mailing Address: New Mailing Address:

347 BOLLENDER ROAD
BOLENDER ROAD
BOLENDER ROAD
BOLENDER ROAD

AUBURNDALE, FL 33823 US AUBURNDALE, FL 33823 US

FEI Number: 59-1173823 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MULFORD, GERALDINE
347 BOLLENDER ROAD
AUBURNDALE, FL 33823 US

MULFORD, GERALDINE
347 BOLENDER ROAD
AUBURNDALE, FL 33823 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: 01/11/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: PD () Delete Title: PD (X) Change () Addition Name: MULFORD, GERALDINE Name: MULFORD, GERALDINE

Address: 347 BOLLENDER ROAD Address: 347 BOLENDER ROAD
City-St-Zip: AUBURNDALE, FL City-St-Zip: AUBURNDALE, FL

Title: VD () Delete Title: VD (X) Change () Addition
Name: MULFORD ALVIN Name: MULFORD ALVIN

Name:MULFORD, ALVINName:MULFORD, ALVINAddress:347 BOLLENDER ROADAddress:347 BOLENDER ROADCity-St-Zip:AUBURNDALE, FLCity-St-Zip:AUBURNDALE, FL

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 WATSON, JEANNIE
 Name:
 WATSON, JEANNIE

 Address:
 347 BOLLENDER ROAD
 Address:
 347 BOLENDER ROAD

 City-St-Zip:
 AUBURNDALE, FL 33823
 City-St-Zip:
 AUBURNDALE, FL 33823

I hereby certify that the information supplied with this filing does not qualify for the 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: GERALDINE MULFORD PD 01/11/2007