2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 16, 2000 8:00 am
Secretary of State
03-16-2000 90086 036 ***150.00

DOCUMENT # G94988

1. Entity Name

MIDWAY AM/CAN HOME OWNERS, INC.

Principal Place of Business	Mailing Address
MIDWAY TRAILER COURT 12674 SEMINOLE BLVD. LARGO FL 34648	MIDWAY TRAILER COURT 12674 SEMINOLE BLVD. LARGO FL 33778-2255

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2808460 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MONTAYNE, JUNE #M15 12674 SEMINOLE BLVD. LARGO FL 34648	Name: SANDRA G. MILLER Street Address (P.O. Box Number is Not Acceptable): 12674 SEMINOLE BLVD C-23 City: LARGO, FL Zip Code: 33778

8. 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: Sandra G. Miller — SANDRA G. MILLER — 3-11-00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing *Trust Fund Contribution* ☐ **$5.00** May Be *Added to Fees*

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DUNHAM, D. LAWRENCE 12674 SEMINOLE BLVD C42 LARGO FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR WILHIDE, ROBERT 12674 SEMINOLE BLVD C-20 LARGO, FL	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FOSTER, BERYL 12674 SEMINOLE BLVD C4 LARGO FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD LOWE, ROY 12674 SEMINOLE BLVD LARGO FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PRAKKEN, MAUREEN 12674 SEMINOLE BLVD 26 LARGO FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY PRAKKEN, MAUREEN 12674 SEMINOLE BLVD s26 LARGO, FL	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HOVERMAN, BETTY 12674 SEMINOLE BLVD S13 LARGO FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER VOLKERNICK, PATRICIA 12674 SEMINOLE BLVD H-2 LARGO, FL	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOILEAU, GERALD 12674 SEMINOLE BLVD C36 LARGO FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] PRESIDNET 3-11-00 727-585-7797
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #