

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2003 8:00 am
Secretary of State

03-12-2003 90123 023 ***150.00

DOCUMENT # G94988

1. Entity Name
MIDWAY AM/CAN HOME OWNERS, INC.



Principal Place of Business
**MIDWAY TRAILER COURT
12674 SEMINOLE BLVD.
LARGO FL 34648**

Mailing Address
**MIDWAY TRAILER COURT
12674 SEMINOLE BLVD.
LARGO FL 34648**

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**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**MILLER, SANDRA G
#C23
12674 SEMINOLE BLVD.
LARGO FL 34648**

7. Name and Address of New Registered Agent

Name **Dawn Sowards**
Street Address (P.O. Box Number is Not Acceptable)
12674 Seminole Blvd.
X-1
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* **Dawn Sowards, Park Sec. 2/28/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. 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	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALVIN, KATIE 12674 SEMINOLE BLVD B-12 LARGO FL 33778 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOWE, ROY 12674 SEMINOLE BLVD C-39 LARGO FL 33778 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PRAKKEN, MAUREEN 12674 SEMINOLE BLVD 26 LARGO FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILHIDE, ROBERT 12674 SEMINOLE BLVD C-20 LARGO FL 33778 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Chandler, Joyce 12674 Seminole Blvd. C-20 Largo, FL 33778 ☒ 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

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #