

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J98064

Entity Name: MDM SERVICES, INC.

FILED
Mar 13, 2012
Secretary of State

Current Principal Place of Business:

1055 KATHLEEN ROAD
LAKELAND, FL 33805 US

New Principal Place of Business:

Current Mailing Address:

1055 KATHLEEN ROAD
LAKELAND, FL 33805 US

New Mailing Address:

FEI Number: 59-2854179 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FEAR, CHRISTOPHER M
ONE LAKE MORTON DR
LAKELAND, FL 33801 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

OFFICERS AND DIRECTORS:

Title: PD
Name: SATHIANATHAN, DHIVY
Address: 5305 LAKELAND HIGHLANDS ROAD
City-St-Zip: LAKELAND, FL 33813

Title: ST
Name: ALEXANDER, MICHAEL M
Address: 3447 ASHLING DRIVE
City-St-Zip: LAKELAND, FL 33803

Title: DV
Name: MORGAN, CHARLES J
Address: 4360 CREEKWOOD LANE
City-St-Zip: MULBERRY, FL 33860

Title: DV
Name: MORRIS, RICHARD R
Address: 11014 NW 19TH STREET
City-St-Zip: CORAL GABLES, FL 33071

Title: DV
Name: LINGERFELDT, PAUL E
Address: 11860 NW 4TH STREET
City-St-Zip: PLANTATION, FL 33325

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: DHIVY SATHIANATHAN

PD

03/13/2012

Electronic Signature of Signing Officer or Director

Date