

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000003310

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** MID POINT PLAZA, L.L.C.

**Current Principal Place of Business:**

2409 13 DEL PRADO  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

1512 S.W. 58TH ST.  
CAPE CORAL, FL 33914

**New Mailing Address:**

**FEI Number:** 01-0670758

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOMER, DAVID W  
1512 S.W. 58TH ST.  
CAPE CORAL, FL 33914 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** GOMER, DAVID W  
**Address:** 1512 S.W. 58TH ST.  
**City-St-Zip:** CAPE CORAL, FL 33914

**Title:** MGRM  
**Name:** GOMER, BRIAN D MGR  
**Address:** 3618 DEL PRADO SOUTH  
**City-St-Zip:** CAPE CORAL, FL 33904

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID W. GOMER

MGR

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date