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PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01455

(5)

MIDLAND CAPITAL CORPORATION

| FILED              |   |  |  |  |  |  |  |  |  |  |  |
|--------------------|---|--|--|--|--|--|--|--|--|--|--|
| May 05 1998 8:00am | 1 |  |  |  |  |  |  |  |  |  |  |
| Secretary of State |   |  |  |  |  |  |  |  |  |  |  |

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04-01-98 (813) 461-4801

|   |   |                        |  |                     |            |                |                           |   |                                |                 |                      |                           | <b>i</b>              |  |
|---|---|------------------------|--|---------------------|------------|----------------|---------------------------|---|--------------------------------|-----------------|----------------------|---------------------------|-----------------------|--|
| Principal Place of Business Mailing Address |   |                        |  |                     |            |                |                           | ı iddildəl ili maldı lidir dı   |                                |                 | Ç1911 BIBIT I        | 14 <b>8</b> 11 <b>8</b> 6 | 311 1881              |  |
| 33 NORTH GARDEN AVE 33 NORTH GARDEN AVE     |   |                        |  |                     |            |                |                           |   |                                |                 |                      |                           |                       |  |
| Suite 1200<br>Clearwater Fl 34615           |   |                        | SUITE 1200<br>CLEARWATER FL 34615        |                     |            |                |                           | DO NOT WRITE IN THIS SPACE  |                                |                 |                      |                           |                       |  |
|   |   |                        | US                                       |                     |            | ţ              | 3. Date Incorporated or C | ualified  |                                |                 |                      |                           |                       |  |
|   | <u> </u>  |                        |  |                     |            |                |                           | 03/30/1984  |                                |                 |                      |                           |                       |  |
|   | lace of Business  | 2a.                    | Mailing Address                          |                     |            |                |                           | 4. FEI Number   |                                |                 |                      | Appli                     | ed For                |  |
|   | th Garden Ave.  | 26                     | 33 North G                               | arden               | Av         | e.             |                           | <u>59-2395304</u>   |                                |                 |                      |                           | pplicable             |  |
| Suite, Apt.                                 | - ' <del>-</del> '  | -                      | Suite, Apt. #, etc.                      |                     |            |                | 1                         | 5. Certificate of Status De   | sired [                        | )               | \$8.7                |                           | -                     |  |
| 22 Suite<br>City & State                    | 1200  | 27                     | Suite 1200<br>City & State               |                     |            |                |                           | . Floring Occupies Pro  |                                |                 |                      | Requ                      |                       |  |
| 23 Cleary                                   | vater FL  | 28                     | Clearwater                               | $\operatorname{FL}$ |            |                |                           | <ol><li>Election Campaign Final<br/>Trust Fund Contribution</li></ol> | ~ —                            | 1               | \$5.C                | JU Ma<br>ad to F          |                       |  |
| Zip   | Country   |                        | Zip                                      | Cou                 | intry      | ,              |                           | 8. This corporation owes  |                                | <del>-</del>    |                      |                           |                       |  |
| 24 33755                                    | 25  | 29                     | 33755                                    | 30                  |            |                |                           | Personal Property Tax   | -                              |                 | Yes                  | ☐ N                       | -                     |  |
|   | g. Name and Address of Curre  | nt Regis               | tered Agent                              | <u> </u>            |            |                |                           | 10. Name and Address of   | New Regist                     | ered /          | Agent                |                           |                       |  |
| BAI   | NK\$, ROBERT J.   |                        |  |                     | 81         | Name           | Ronk                      | s, Robert J.  |                                |                 |                      |                           |                       |  |
|   | NORTH GARDEN AVE, SUITE   | 1200                   |  |                     | 82         | Street A       | Addres                    | s (P.O. Box Number is Not   | Acceptable)                    |                 |                      |                           |                       |  |
| CU  | EARWATER FL 34615   |                        |  |                     | <u> </u>   | 33 No          | orth                      | <u>Garden Ave. Si</u>   | <u> </u>                       | <u> </u>        |                      |                           |                       |  |
|   |   |                        |  |                     | 83         |                |                           |   |                                |                 |                      |                           |                       |  |
|   |   |                        |  |                     | 84         | City           |                           |   |                                |                 | 85 Z                 | ip Cod                    | de                    |  |
|   | 1   |                        | 03.4500 E                                |                     | L_J        |                |                           | water   | <del>-,</del>                  | FL              | 3                    | <u> 375:</u>              | 5                     |  |
| office or r                                 | to the provisions of Sections 607.05<br>egistered agent, or both, in the Stat | e of Ftorio            | da. Such change was                      | : authorized        | d by       | the coro       | corporation               | ration submits this statement<br>n's board of directors. I here       | tor the purpo<br>by accept the | ose of<br>e app | changing<br>cintment | g its re<br>as reg        | egistered<br>gistered |  |
| agent. I a                                  | m familiar with, and accept the obli  | gations of             | f. Section 607.05 <b>0</b> 5, F          | Florida Stat        | utes       | 5.             |                           |   |                                |                 |                      |                           | _                     |  |
| SIGNATURE                                   | Signature typed or printed name of registered as                              | nent and bile          | d producable (NC                         | 1F Pagistore        | d Ann      | ot signatura   | tenuited :                | when reinstating)   |                                | ATE             |                      |                           |                       |  |
| 12.   | OFFICERS A  |                        |  | 13.                 | - ngo      | All Bigitaldro |                           | ADDITIONS/CHANGES   |                                |                 | DIRECT               | OBS I                     | N 12                  |  |
| TITLE                                       | PS  |                        | DELETE                                   | 1,1 TII             | TLE        | T              |                           |   |                                |                 | Chang                |                           | Addition              |  |
| NAME  | GLOECKL, KEITH J.   |                        |  | 1.2 NA              | AME        | ĺ              |                           |   |                                |                 |                      |                           |                       |  |
| STREET ADDRESS                              | 33 NORTH GARDEN AVE, S  | UITE 120               | 00                                       | 1.3 ST              | REFT       | ADDRESS        |                           | •   |                                |                 |                      |                           |                       |  |
| CITY-ST-ZIP                                 | CLEARWATER FL   |                        |  | 14 CI               | TY-S       | T-ZIP          |                           |   |                                |                 |                      |                           |                       |  |
| TITLE                                       | EVI   |                        | DELETE                                   | 2.1 TI              | TLE        |                |                           |   |                                |                 | Chang                | je [                      | Addition              |  |
| NAME  | MATHIS, RAY F.  |                        | _ •                                      | 2.2 NA              | ME         |                |                           |   |                                |                 |                      |                           |                       |  |
| STREET ADDRESS                              | 33 NORTH GARDEN AVE, S  | UITE 12                | 00                                       | 2.3 ST              | REET       | ADDRESS        |                           |   |                                |                 |                      |                           |                       |  |
| CITY-ST-ZIP                                 | CLEARWATER FL   |                        | T DECEST                                 |                     |            | ST-ZIP         |                           |   |                                |                 |                      | <del></del>               | 1.4.400               |  |
| TITLE                                       | WACUTIED DATRICIA   |                        | ☐ DELETE                                 | 3.1 Til             |            | -              |                           |   |                                |                 | ∐ Chang              | e L                       | Addition              |  |
| NAME  | WACHTLER, PATRICIA  | IIITE 404              | 00                                       | 3.2 NA              |            | 1500000        |                           |   | •                              |                 |                      |                           |                       |  |
| STREET ADDRESS                              | 33 NORTH GARDEN AVE, S<br>CLEARWATER FL                                       | טווב וצו               | w  |                     |            | ADDRESS        |                           |   |                                |                 |                      |                           |                       |  |
| CITY-ST-ZIP<br>TITLE                        | D   |                        | DELETE                                   | 4.1 Til             | _          | ST-ZIP         |                           |   |                                |                 | Chang                | ie T                      | Addition              |  |
| NAME  | BANKS, ROBERT J.  |                        |  | 4. 2 N              |            |                |                           |   |                                |                 |                      | _                         |                       |  |
| STREET ADDRESS                              | 33 NORTH GARDEN AVE, S  | UITE 121               | 00                                       |                     |            | ADDRESS        |                           |   |                                |                 |                      |                           |                       |  |
| CITY-ST-ZIP                                 | CLEARWATER FL   |                        |  |                     |            | T- ZIP         |                           |   |                                |                 |                      |                           |                       |  |
| TITLE                                       | VAS   |                        | ☐ DEL <b>ete</b>                         | 5.1 TII             |            |                |                           |   |                                |                 | Chang                | je [                      | Addition              |  |
| NAME  | CHEERS, LINDA D.  |                        |  | 5.2 NA              | AME        |                |                           |   |                                |                 |                      |                           | İ                     |  |
| STREET ADDRESS                              | 33 NORTH GARDEN AVE, S  | UITE 121               | 00                                       | 5.3 ST              | REET       | ADDRESS        |                           |   |                                |                 |                      |                           |                       |  |
| CITY-ST-ZIP                                 | CLEARWATER FL   |                        |  | 54 CI               | TY-S       | T-ZIP          |                           |   | <del></del>                    |                 |                      |                           |                       |  |
| TITLE                                       |   |                        | DELETE "                                 | 6.1 TI              | TLE        |                |                           |   |                                | _               | Chang                | ,е [                      | Addition              |  |
| NAME  |   |                        |  | 6.2 NA              | <b>AME</b> |                |                           |   |                                |                 |                      |                           |                       |  |
| STREET ADDRESS                              |   |                        |  |                     |            | ADDRESS        |                           |   |                                |                 |                      |                           |                       |  |
| CITY-ST-ZIP                                 | notify that the information and the   |                        | line does not make                       | 6.4 CI              |            |                | al in C-                  | olion 440 07/0V3 - 511 0  | foliates ( f                   |                 | المساكر والقور       | in a to 1                 | a ron ott             |  |
| Indicated                                   | certify that the information supplied on this annual report or supplement     | tal annua              | I report is true and ac                  | ccurate and         | d tha      | at my sigr     | nature :                  | shall have the same legal e   | ffect as if mad                | de und          | der oath:            | that I                    | am an                 |  |
| officer or a<br>Block 12 of                 | director of the corporation or the re-<br>or Block 13 if changed or on an att | ceiver or t<br>achment | trustee empowered to<br>with an address. | execute t           | lhis I     | report as      | require                   | ed by Chapter 607, Florida S  | Statutes; and                  | that n          | ny name              | appea                     | ars in                |  |
|   | <i>//</i> _   |                        |  |                     |            |                |                           |   |                                |                 |                      |                           |                       |  |

Ray F. Mathis