

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000032875

FILED
Mar 13, 2007
Secretary of State

Entity Name: MID-FLORIDA PETROLEUM CONSTRUCTION, INC.

Current Principal Place of Business:

P.O. BOX 18403
TAMPA, FL 33629

New Principal Place of Business:

2212 EAST 4TH AVENUE
TAMPA, FL 33605

Current Mailing Address:

P.O. BOX 18403
TAMPA, FL 33629

New Mailing Address:

P.O. BOX 18423
TAMPA, FL 33679

FEI Number: 02-0566823

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WADSWORTH, KEITH H
130 EAST CENTRAL AVENUE
LAKE WALES, FL 33853 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: EDWARDS, JOHN R
Address: 1111 N WESTSHORE BLVD SUITE 101B
City-St-Zip: TAMPA, FL 33607

Title: STD () Delete
Name: BELYEA, PAUL R
Address: 4115 EMPEDRADO STREET
City-St-Zip: TAMPA, FL 33629

Title: VD () Delete
Name: GIBSON, BRIAN D
Address: 1649 OPEN FIELD LOOP
City-St-Zip: BRANDON, FL 33510

Title: VD (X) Delete
Name: SCHROM, ROBERT C
Address: 16924 FALCONRIDGE ROAD
City-St-Zip: LITHIA, FL 33547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST (X) Change () Addition
Name: EDWARDS, JOHN R
Address: 3309 S. SCENIC HWY
City-St-Zip: LAKE WALES, FL 33898

Title: VD (X) Change () Addition
Name: GIBSON, BRIAN D
Address: 5513 WINDING BROOK LANE
City-St-Zip: VALRICO, FL 33954

Title: VD (X) Change () Addition
Name: SCHROM, ROBERT C
Address: 16924 FALCONRIDGE ROAD
City-St-Zip: LITHIA, FL 33547

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN R EDWARDS

P

03/13/2007

Electronic Signature of Signing Officer or Director

_____ Date