

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157153

Entity Name: MI-DI BUILDERS, INC.

FILED
May 19, 2009
Secretary of State

Current Principal Place of Business:

4149 N CONCORD DRIVE
CRYSTAL RIVER, FL 32192

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 60
SPARR, FL 32192

New Mailing Address:

FEI Number: 20-0514209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRACIE L PAYNE EA INC
234 SE 1ST ST
WILLISTON, FL 32696 US

Name and Address of New Registered Agent:

TRACIE L PAYNE EA INC
11250 NE 77TH ST
BRONSON, FL 32621 US

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: TRACIE L PAYNE

05/19/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STEWART, THOMAS W
Address: P.O. BOX 60
City-St-Zip: SPARR, FL 32192

Title: VP () Delete
Name: CACCAMO, JOSEPH
Address: 4149 N CONCORD DRIVE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: 2VP (X) Delete
Name: LEADINGHAM, EDWIN PATRICK T
Address: 2899 NE 19TH AVE
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: THOMAS STEWART

PRES

05/19/2009

Electronic Signature of Signing Officer or Director

Date