## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 08, 2008 08:00 Al Secretary of State

DOCUMENT # P0400067961  1. Entity Name MID-FLORIDA T-TOPS, INC.			Secretary of St	
Principal Plac		Mailing Address		
HOMOSASSA	DLEE DR., UNIT C , FL 34448	10330 W. YULEE DR., UNIT C Homosassa, FL 34448		
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	The state of the s			01302008 No Chg-P CR2E034 (11/05)
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				4. FE! Number   Applied For   20-1059703   Not Applicable
		Han Water water		5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent				
CRANMER, JAMES A			a water	DO NOT WRITE
10330 W. YULEE DR., UNIT C HOMOSASSA, FL 34448				
				IN THIS SPACE
			Santaine .	
<ol> <li>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. I am familiar with, and accept the obligations of registered agent.</li> </ol>				
SIGNATURE  Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when renstating)  DATE				
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Final	ncing \$5.	.00 May Be ed to Fees
10.	OFFICERS AND DI	RECTORS		
TIFLE	PTD CRANMED IAMES A			The second of the second of the second
NAME STREET ADDRESS	CRANMER, JAMES A 11125 N. WAHOO TRAIL		331617	000000886688
CITY-ST-ZIP	DUNNELLON, FL 34433			150,000   150,00
TITLE NAME	VSD ROMANIK, JOHN			
STREET ADDRESS CITY: ST-ZIP	11671 W. COQUINA CT. CRYSTAL RIVER, FL 34429		The state of the s	and the state of t
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NAME STREET ADDRESS		•		
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TITLE NAME	_ ·		100	
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CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE				IN THIS SPACE
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under calh; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John Land James Cranmer Signature and typed on Printed Name of Signing Officer or Director

4-6-08

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