2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2012
Secretary of State

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Entity Name: WOLFE ENTEPRISES OF MID FLORIDA, INC.

Current Principal Place of Business:

16 TALAQUAH BLVD.
ORMOND BEACH, FL 32174

New Principal Place of Business:

16 TALAQUAH BLVD.
ORMOND BEACH, FL 32174 US

Current Mailing Address:

16 TALAQUAH BLVD.
ORMOND BEACH, FL 32174

New Mailing Address:

16 TALAQUAH BLVD.
ORMOND BEACH, FL 32174 US

FEI Number: 75-3171860 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURT, DAVID A
501 SOUTH RIDGEWOOD AVE.
DAYTONA BEACH, FL 32114 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

OFFICERS AND DIRECTORS:

Title: D
Name: WOLFE, MARK
Address: 16 TALAQUAH BLVD.
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: DST
Name: WOLFE, VIRGINIA L
Address: 16 TALAQUAH BLVD.
City-St-Zip: ORMOND BEACH, FL 32174 US

I hereby 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 all other like empowered.

SIGNATURE: VIRGINIA L WOLFE DST 01/04/2012

Electronic Signature of Signing Officer or Director — Date