2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000044231

Entity Name: MIDWAY GREENHOUSES, INC.

FILED Jan 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 955 OLD STATE ROAD 8 956 OLD STATE ROAD 8 VENUS, FL 33690 VENUS, FL 336902127 US **Current Mailing Address: New Mailing Address:** 955 OLD STATE ROAD 8 956 OLD STATE ROAD 8 VENUS, FL 33690 VENUS, FL 336902127 US FEI Number: 20-2589020 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KOORNNEEF, JACOB PD 956 OLD STATE ROAD 8 **BDB AGENT CO** 5355 TOWN CENTER ROAD BOCA, FL 33486 VENUS, FL 339602127 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: JACOB KOORNNEEF 01/20/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition KOORNNEEF, JACOB Name: Name: 7752 BRIDLINGTON DRIVE Address: Address: City-St-Zip: BOYNTON BEACH, FL 33437 US City-St-Zip: Title: VPD Title: () Delete () Change () Addition KOORNNEEF, EDWARD W Name: Name: 130 DEANNA DRIVE Address: Address: LAKE PLACID, FL 33852 US City-St-Zip: City-St-Zip: Title: Title: STD () Delete () Change () Addition GILDE, RANDOLPH P Name: Name: 433 LAKE MIRROR DRIVE Address: Address: City-St-Zip: LAKE PLACID, FL 33852 US 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: JACOB KOORNNEEF PTD 01/20/2009