

# **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000134944

**FILED**  
**May 09, 2006**  
**Secretary of State**

**Entity Name:** MID-STATE HOMES & FARMS REALTY INC.

**Current Principal Place of Business:**

7614 COUNTY ROAD 763  
BUSHNELL, FL 33513

**New Principal Place of Business:**

**Current Mailing Address:**

7614 COUNTY ROAD 763  
BUSHNELL, FL 33513

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

BEVILLE, CLAIBORNE L PSTD  
7614 CR 763  
BUSHNELL, FL 33513 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: CLAIBORNE BEVILLE

05/09/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: BEVILLE, CLAIBORNE  
Address: 7614 COUNTY ROAD 763  
City-St-Zip: BUSHNELL, FL 33513

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: CLAIBORNE BEVILLE

PSTD

05/09/2006

Electronic Signature of Signing Officer or Director

Date