FILED Feb 06, 2008 8:00 am Secretary of State

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DOCUMENT # P05000155608 MID-STATE RANCH, INC. 40018879 Principal Place of Business Mailing Address 10501 DURRANCE ROAD 10501 DURRANCE ROAD SEBRING, FL 33872 SEBRING, FL 33872 CR2E034 (11/05) 01282008 No Chg-P DO NOT WRITE IN THIS SPACE 4. FE! Number Applied For 57-0560989 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WATSON, JOHN C III DO NOT WRITE 10501 DURRANCE ROAD SEBRING, FL 33872 IN THIS SPACE 8. 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS ,10. PD TITLE WATSON, JOHN C III NAME 10501 DURRANCE ROAD STREET ADDRESS CITY-ST-ZIP SEBRING, FL 33872 TITLE NAME STREET ADDRESS CITY-\$1-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP "

NAME. STREET ADDRESS CITY-ST-ZIP -