

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P35449

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** MID-WEST DIVERSIFIED MANAGEMENT CORP.

**Current Principal Place of Business:**

5800 NW 74TH PL  
COCONUT CREEK, FL 33473 US

**New Principal Place of Business:**

**Current Mailing Address:**

5800 NW 74TH PL  
COCONUT CREEK, FL 33473 US

**New Mailing Address:**

PO BOX 1030  
O'FALLON, MO 63366 US

**FEI Number:** 43-1332785

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GORDON, JAMES N  
5800 NW 74TH PL  
COCONUT CREEK, FL 33473 US

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

FINLAYSON, ROBIN  
5800 NW 74TH PL  
COCONUT CREEK, FL 33473 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: ROBIN FINLAYSON

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPT  
Name: GORDON, JAMES N  
Address: 5800 NW 74TH PL  
City-St-Zip: COCONUT CREEK, FL 33473 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: JAMES N. GORDON

DPT

04/30/2012

Electronic Signature of Signing Officer or Director

Date