2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000012721

MIDWAY WAREHOUSE INVESTORS, INC.



FILED Feb 15, 2008 08:00 AM Secretary of State

Principal Place of Business

2910 W BAY TO BAY BLVD

STE 200 TAMPA, FL 33629 US Mailing Address

2008 RIVERSIDE AVE

STE 100

JACKSONVILLE, FL 32204





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01072008 No Cha-P CR2E034 (11/05)

4. FEI Number 59-3163368 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KENNEDY, DAVID A 2910 W BAY TO BAY BLVD **STE 200** TAMPA, FL 33629

DO NOT WRITE 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

10.	OFFICERS AND DIRECTORS										
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOSTER, FRANK M JR 8 BROOK LANE LAKELAND, FL 33803										
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KENNEDY, DAVID A 2910 W BAY TO BAY BLVD STE 200 TAMPA, FL 33629										
TITLE NAME STREET ADDRESS GITY-ST-ZIP	VPT RODANTE, SAM 2008 RIVERSIDE AVE, SUITE 100 JACKSONVILLE, FL 32204										
TITLE NAME STREET ADDRESS CITY-ST-ZIP											
TITLE NAME STREET ADDRESS I CITY-ST-ZIP											
TITLE NAME STREET ADDRESS CITY-ST-ZIP											

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DO NOT WRITE IN THIS SPACE

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR