

## **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P94000003623

**FILED**  
**Feb 10, 2010**  
**Secretary of State**

**Entity Name:** A MID-FLORIDA DRIVER IMPROVEMENT SCHOOL, INC.

**Current Principal Place of Business:**

5725 SE ABSHIER BLVD  
BELLEVIEW, FL 34420 US

**New Principal Place of Business:**

**Current Mailing Address:**

5421 SE 38TH AVE  
OCALA, FL 34480 US

**New Mailing Address:**

**FEI Number:** 65-0459314

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SWOAP, MELISSA D  
5421 SE 38TH AVE  
OCALA, FL 34480 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: V  
Name: SWOAP, ZONA E  
Address: 5421 SE 38TH AVE  
City-St-Zip: OCALA, FL 34480 US

Title: P  
Name: SWOAP, MELISSA D  
Address: 5421 SE 38TH AVE  
City-St-Zip: OCALA, FL 34480 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: MELISSA SWOAP

PRES

02/10/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date