


150

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>CORPORATION</b> <i>Annual Report</i>		 <b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS		<b>FILED</b> <b>06 MAY -3 PM 12: 17</b> SECRETARY OF STATE TALLAHASSEE, FLORIDA  <b>800074508048</b> 05/12/06--01009--003 **300.00  CR2E081 (12/05)																													
<b>DOCUMENT #</b> P 97000012781																																	
<b>1. Corporation Name</b> MID STATE ENTERPRISES CORPORATION																																	
<b>2. Principal Office Address</b> 2730 MINE & MILL ROAD Suite, Apt. #, etc. City & State LAKELAND FLORIDA Zip Country 33801 POLK			<b>3. Mailing Office Address</b> 2730 MINE & MILL ROAD Suite, Apt. #, etc. City & State LAKELAND FLORIDA Zip Country 33801 POLK																														
			<b>4. Date Incorporated or Qualified To Do Business in Florida</b> 05/12/06																														
			<b>5. FEI Number</b> 65 0322115		Applied For Not Applicable																												
			<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status																														
<b>7. Name and Address of Current Registered Agent</b> Name RICHARD E. RAHN JR. Street Address (P.O. Box Number is Not Acceptable) 2730 MINE & MILL ROAD Suite, Apt. #, Etc. City State Zip Code LAKELAND FLORIDA FL 33801																																	
<b>8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.</b> Signature of Registered Agent <i>Harold Kersey</i> Date <i>4/27/06</i> REGISTERED AGENT MUST SIGN																																	
<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Titles</th> <th>Name of Officers and/or Directors</th> <th>Street Address of Each Officer and/or Director</th> <th>City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>D</td> <td>HAROLD E. KERSEY</td> <td>2730 MINE &amp; MILL ROAD</td> <td>LAKELAND FLORIDA 33801</td> </tr> <tr> <td>VP</td> <td>RICHARD E. RAHN JR</td> <td>2730 MINE &amp; MILL ROAD</td> <td>LAKELAND FLORIDA 33801</td> </tr> <tr> <td>T</td> <td>LAURA KERSEY</td> <td>2730 MINE &amp; MILL ROAD</td> <td>LAKELAND FLORIDA 33801</td> </tr> <tr> <td>S</td> <td>DOREEN DOWDICAN</td> <td>2730 MINE &amp; MILL ROAD</td> <td>LAKELAND FLORIDA 33801</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>						Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	D	HAROLD E. KERSEY	2730 MINE & MILL ROAD	LAKELAND FLORIDA 33801	VP	RICHARD E. RAHN JR	2730 MINE & MILL ROAD	LAKELAND FLORIDA 33801	T	LAURA KERSEY	2730 MINE & MILL ROAD	LAKELAND FLORIDA 33801	S	DOREEN DOWDICAN	2730 MINE & MILL ROAD	LAKELAND FLORIDA 33801								
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip																														
D	HAROLD E. KERSEY	2730 MINE & MILL ROAD	LAKELAND FLORIDA 33801																														
VP	RICHARD E. RAHN JR	2730 MINE & MILL ROAD	LAKELAND FLORIDA 33801																														
T	LAURA KERSEY	2730 MINE & MILL ROAD	LAKELAND FLORIDA 33801																														
S	DOREEN DOWDICAN	2730 MINE & MILL ROAD	LAKELAND FLORIDA 33801																														
<b>10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.</b> SIGNATURE: <i>Richard E. Rahn</i> Date <i>4-27-06</i> Daytime Phone # <i>8636656233</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																	