2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S00529

FILED Apr 15, 2009 Secretary of State

Entity Nam	e: MID FLORI	DA GOLF CAR DIST., INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	CHURCH AVE DD, FL 32750	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	CHURCH AVE DD, FL 32750	US			
FEI Number:	59-3028560	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and Address	of New Registered Agent:	
SANDERS, BOBBY J., JR. 750 NORTH HWY 17-92 LONGWOOD, FL 32750 US			SUITE 200	10 WINDSORMERE WAY	
The above r		bmits this statement for the pu	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: TODD WALKER				04/15/2009	
Electronic Signature of Registered Agent Date					
Election Cam	paign Financing 1	Frust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VP () D SANDERS, BOBB 1824 MARSHALL LONGWOOD, FL	SY J., JR. DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () D SANDERS, DARR 2350 SPRING GA DELAND, FL 327	RDEN AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DARRON SANDERS **PRES** 04/15/2009