Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90289 016 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # SQ2150

1. Corporation MIDLANT	IC DATA SYSTEMS, INC.						
Principal Place of Business Mailing Address					I (BB)(\$10 trb (Ba) trbat trbat trbat gratt gott gratt	#1011 01311 41011 P	16ti Aidii 160i
7705 PROGRESS CIRCLE 7705 PROGRESS CIRCLE					1		
MELBOURNE FL 32904 MELBOURNE FL 32904					DO NOT WRITE IN THIS SPACE		
US US				3. Date Incorporated or Qualif			
					11/04/1991		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Apr	plied For
21	26				59-3091850	Not	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			7		5. Certificate of Status Desired	\$8.75 A	
22					3. Cermone of Status Bosinos	Fee Re	quired
		City & State	City & State		6. Election Campaign Financing	\$5.00	
23	28				Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Country	1	8. This corporation owes the current year la		
24	25 29 30		0		r craonal reporty rax.		□No
	9. Name and Address of Curren	t Registered Agent	81	N	10. Name and Address of New Registered	Agent	
WOO	ODALI LINDA D		81	Name			
WOODALL, LINDA D 7705 PROGRESS CIRCLE			82	Street Add	dress (P.O. Box Number is Not Acceptable)		Ì
MELBOURNE FL 32904			83				
			84	City		85 Zip C	Code
·			1 1 1		<u> </u>		
agent. I ar SIGNATURE	egistered agent, or both, in the State on familiar with, and accept the obligate significant or printed name of registered agent	tions of, Section 607.0505, Florid	a Statutes		poration submits this statement for the purpose of the purpose of the portion's board of directors. I hereby accept the appeared when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	O DELETE		1,1 TITLE			Change	☐ Addition
NAME	WOODALL, LINDA D		1.2 NAME				Į
STREET ADDRESS	REET ADDRESS 202 LANTERNBACK ISLAND DRIVE		1.3 STREET ADDRESS				
CITY-ST-ZIP	SATELLITE BEACH FL 32937		1.4 CITY-S	T-ZIP			
TITLE	P DELETE 2.1 T		2.1 TITLE	j		Change	Addition [
NAME	WOODALL, ONAILLEO II		2.2 NAME)			1
STREET ADDRESS	DORESS 202. LANTERNBACK ISLAND DRIVE		2.3 STREE	TADDRESS	ي المحادث الماد الم	. • •	-
CITY-ST-ZIP			2. 4 CITY-S	ST-ZIP			
TITLE	☐ DELETE 3.1 T		3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS	or [TADDRESS			
C/TY-ST-ZIP			3.4. CITY-5	ST-ZIP		Change	
TITLE			4.1 TITLE	1		Change	☐ Addition I
NAME	1		4.2 NAME				}
STREET ADDRESS			1	TADDRESS			}
CITY-ST-ZIP			4.4 CITY-S	ST-ZIP		Change	Addition
TITLE			5.1 TITLE 5.2 NAME			[_] Gridingo	
NAME			1	TADDRESS			
STREET ADDRESS		•					
CITY-ST-ZIP	51-219		5.4 CITY-S 6.1 TITLE	91+ZIP		☐ Change	Addition
TITLE	ght uith this seath	□ nerese	6.2 NAME			_ 3,10,190	
13.7				T ADORESS			
\$TREET ADDRESS	* * **		J U				

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

487-725-2411