

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V63337** (2)
1. Corporation Name
MID FLORIDA DIESEL SERVICE, INC.



Principal Place of Business Mailing Address
7595 NW COUNTY HWY 25-A
STE. E
OCALA FL 34482
US

2. Principal Place of Business 2a. Mailing Address
21 **3950 W. Hwy 326** 26 **3950 W. Hwy 326**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **FL** 27 **FL**
City & State City & State
23 **Ocala, FL** 28 **Ocala, FL**
Zip Country Zip Country
24 **34482** 25 **Marion** 29 **34482** 30 **Marion**

3. Date Incorporated or Qualified **09/08/1992** 3a. Date of Last Report **03/27/1995**
4. FEI Number **59-3135599** Apply For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

COOVERT, TERESA M.
6821 NW 60TH ST., RD
OCALA FL 34482

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Teresa Covert

Teresa Covert

6-10-96

Signature typed or printed name of registered agent and office of application

(NOTE: Registered Agent signature required when re-issuing)

DATE

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY - ST - ZIP
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE NAME STREET ADDRESS CITY - ST - ZIP
12 NAME
13 STREET ADDRESS
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DATE

CR2E034 (3/96)