

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 467124

Entity Name: MID-STATE MACHINE AND FABRICATING CORPORATION**Current Principal Place of Business:**2730 MINE & MILL ROAD
LAKELAND, FL 33801**Current Mailing Address:**2730 MINE & MILL ROAD
LAKELAND, FL 33801 US**FEI Number:** 59-1639133**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US*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**Officer/Director Detail :**

Title CHAIRMAN, DIRECTOR
Name KERSEY, HAROLD E
Address 2730 MINE & MILL ROAD
City-State-Zip: LAKELAND FL 33801

Title COO
Name HOOTEN, JOHN
Address 2730 MINE & MILL ROAD
City-State-Zip: LAKELAND FL 33801

Title CFO
Name HODGE, TOM
Address 2730 MINE & MILL ROAD
City-State-Zip: LAKELAND FL 33801

Title VP, DIRECTOR
Name DOWDEN, WILLIAM L III
Address 601 BAYSHORE BLVD
SUITE 850
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name DARNELL, JAMES B
Address 601 BAYSHORE BLVD
SUITE 850
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name MADDEN, KYLE P.
Address 601 BAYSHORE BLVD
SUITE 850
City-State-Zip: TAMPA FL 33606

Title VP
Name LECK, P. JEFFREY
Address 601 BAYSHORE BLVD
SUITE 850
City-State-Zip: TAMA FL 33606

Title CEO, DIRECTOR
Name CLYNE, JEFF
Address 601 BAYSHORE BLVD
SUITE 850
City-State-Zip: TAMPA FL 33606

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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: JEFF CLYNE

CEO

02/01/2019

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	SECRETARY
Name	HART, CHRISTOPHER T.
Address	601 BAYSHORE BLVD SUITE 850
City-State-Zip:	TAMPA FL 33606