

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000087425

Entity Name: M.D.C. ENTERPRISES, INC.**Current Principal Place of Business:**1211 S. PARSONS AVE.
DELAND, FL 32720**Current Mailing Address:**PO BOX 1801
DELAND, FL 32721-1801**FEI Number:** 59-3675248**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORLEY, SR., MILTON D
1211 S. PARSON AVE.
DELAND, FL 32720 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	DC	Title	PT
Name	CORLEY SR, MILTON	Name	CORLEY, RUTHA B
Address	1211 S PARSONS AVE	Address	1211 S PARSONS AVENUE
City-State-Zip:	DELAND FL 32720	City-State-Zip:	DELAND FL 32720
Title	S	Title	V
Name	CORLEY, JR., MILTON D	Name	CORLEY, MICHAEL D
Address	1211 S PARSONS AVENUE	Address	1211 S PARSONS AVE
City-State-Zip:	DELAND FL 32720	City-State-Zip:	DELAND FL 32720

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: MILTON CORLEY SR**PRES****04/29/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date