

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000005113

**Entity Name:** MID AMERICA COMPUTER CORPORATION

**Current Principal Place of Business:**

111 ADMIRAL DR  
BLAIR, NE 68008

**FILED**  
**Mar 06, 2018**  
**Secretary of State**  
**CC6649838364**

**Current Mailing Address:**

P O BOX 700  
BLAIR, NE 68008

**FEI Number: 47-0566442**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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           PTD  
Name           AMAN, CRAIG A  
Address        111 ADMIRAL DR  
City-State-Zip: BLAIR NE 68008

Title           VP  
Name           SIMS, ROBERT J  
Address        111 ADMIRAL DR  
City-State-Zip: BLAIR NE 68008

Title           SD  
Name           AMAN, KAREN B  
Address        111 ADMIRAL DR  
City-State-Zip: BLAIR NE 68008

Title           D  
Name           JACOBSON, MICHAEL A  
Address        111 ADMIRAL DR  
City-State-Zip: BLAIR NE 68008

Title           D  
Name           VANDENACK, JOSEPH R  
Address        111 ADMIRAL DR  
City-State-Zip: BLAIR NE 68008

Title           DIRECTOR  
Name           HUNT, HUGH W  
Address        111 ADMIRAL DR  
City-State-Zip: BLAIR NE 68008

*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: CRAIG A AMAN**

**PRESIDENT**

**03/06/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date