2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000002010

OCALA, FL 34479

MANZONE, JAMES L

3380 SE 2ND CT

OCALA, FL 34471

() Delete

Title:

Name:

Address:

City-St-Zip:

Entity Name: OCALA MODEL RAILROADERS INCOPORATED

FILED Mar 09, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 812 NE TUSCAWILLA AVE OCALA, FL 34470 **Current Mailing Address: New Mailing Address:** P O BOX 6235 OCALA, FL 344786235 FEI Number: 65-0739660 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MANZONE, JAMES L 3380 SE 2ND CT US OCALA, FL 34471 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete

FRISBIE, NEAL MANZONE, JAMES L Name: Name: 216 SE 31ST AVE Address: 3380 SE 2 COURT Address: City-St-Zip: OCALA, FL 34471 City-St-Zip: OCALA, FL 344715179 Title: () Delete Title: (X) Change () Addition Name: OCONNOR, MARSHALL Name: PRIEST, GEORGE Address: 1810 NE 61 ST Address: 9832 NE 23 COURT City-St-Zip: OCALA, FL 34479 City-St-Zip: ANTHONY, FL 32617 Title: () Delete Title: (X) Change () Addition MARSHALL, RUDD Name: RUDD, MARSHALL Name: Address: 1810 NE 61 ST Address: 1810 NE 61 ST City-St-Zip:

> Title: (X) Change () Addition

OCALA, FL 34479

BERKELEY, EDMUND C Name: Address: 3823 SE 11 PLACE City-St-Zip: OCALA, FL 34471

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES L. MANZONE D 03/09/2003