

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 337754

1. Entity Name

OCALA DRIVE-IN THEATRES, INC.

FILED
Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90001 027 ***158.75

Principal Place of Business

Mailing Address

4850 S PINE AVENUE
OCALA FL 34480
US

4850 S PINE AVENUE
OCALA FL 34480-9105
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1224258

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WILLIAMS, LOU
4850 S PINE AVENUE
OCALA FL 34480

Name

Sharon J. Williams

Street Address (P.O. Box Number is Not Acceptable)

4850 S. Pine Avenue

City

Ocala

FL

Zip Code
34480

8. 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

Sharon J. Williams
Signature, typed or printed name of registered agent and title if applicable.

Sharon J. Williams

President

4-10-00

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so. ☒
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete
NAME WILLIAMS, LOU
STREET ADDRESS 4850 S PINE AVE
CITY-ST-ZIP Ocala, FL 00000

TITLE President ☒ Change ☐ Addition
NAME Sharon J. Williams
STREET ADDRESS 4850 S. Pine Ave.
CITY-ST-ZIP Ocala FL 34480

TITLE SD ☐ Delete
NAME TOMLINSON, BRAD
STREET ADDRESS 4850 S PINE AVE
CITY-ST-ZIP Ocala, FL 00000

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME TOMLINSON, GEORGE
STREET ADDRESS 4850 S PINE AVE
CITY-ST-ZIP Ocala, FL 00000

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sharon J. Williams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sharon J. Williams

4-10-00

Date

Daytime Phone

352-629-1325



DO NOT WRITE IN THIS SPACE