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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 435373

OCALA LAND DEVELOPMENT, INC.

FILED

STATE

Jan 22, 1999 8:00am

Secretary of State

01-22-1999 90076 023 ***150.00



Principal Place	of Business	Maning Address			,	•			
2112 COUNTRY.	CLUB PRADO	2112 COUNTRY CLUB PRADO)		,	•			
CORAL GABLES FL 33134 CORAL GABLES FL 33134					DO NOT WRITE IN THIS SPACE				
	" - · · · · · · · · · · · · · · · · · ·				3. Date Incorporated or Qualifed				
				***	11/05/1973		T	liad Far	
2. Principal Place of Business 2a. Mailing Address					4, FEI Number		 	lied For	20
21	26				65-0438204			Applicable	Property.
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	11 '	3.75 Ad		٠.
22		27			5. Octahoda of Calabo Doctor	<u> </u>	Fee Req	uirea	
City & State		City & State		6. Election Campaign Financing		5. 00 N			
23 28		28	8		Trust Fund Contribution Added to Fees				
	Zip Country Zip			Country 8. This corporation owes the current year Intangible					
			30		Personal Property Tax.				
24	9. Name and Address of Current	1441			10. Name and Address of New R	egistered Agen	t		
	5. Name and Address of Content	Trogration of Figure	81	Name					
ĊOM	IBALUZIER, GEORGE L								
	COUNTRY CLUB PRADO		82	Street Add	dress (P.O. Box Number is Not Accepta	ple)			
			-			X	4 7 7		
COR	AL GABLES FL/83)134		83						
		•	84	City	1 1 1 1 1 1 1 1 1 1	85	Zip C	ode	
		` · · · · ·		, ,		FL_ _			
11. Pursuant	to the provisions of Sections 607.0502	and 607 1508 Aprida Statutes	, the abov	e-named cor	rporation submits this statement for the tion's board of directors. I hereby accep	purpose of chan	ging its r	egistered istered	
office or r	egistered agant, o both, in the State of	of Florida. Such change was aut	horized by to Statutes	the corporat	tion's board of directors. I hereby accep	t tile appointmen	11 45 109	1010100	
agent. I a	m familiar with, and accept the obligati	Lannhus			1."	4-99			
SIGNATURE	Signature, typed or wrinted name of registered agent	and titled the This (NOTE: R	egistered Age	nt signature requir	ired when reinstaling)	DATE			୍ଥ ଲ
	Signature, typed organited fiams or registated agent			`	ADDITIONS/CHANGES TO OFF	ICERS AND DI	RECTOR	RS IN 12	ණ
40	OCCICEDS AND	DURECTORS	E 13.		ADDITIONS/CHANGES TO OFF				_
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF		Change	☐ Addition	11
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TITLE NAME	P COMBALUZIER, GEORGE L	DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S		ADDITIONS/CHANGES TO OTT		Change	Addition	CR2E034 (11)
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COMBALUZIER, GEORGE L 2112 COUNTRY CLUB PRADO CORAL GABLES FL 33134 S	DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S		ADDITIONS/CHANGES TO OF		Change	Addition	CR2E034 (11)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P COMBALUZIER, GEORGE L 2112 COUNTRY CLUB PRADO CORAL GABLES FL 33134 S FIGUERAS, MARIA	DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME		ADDITIONS/CHANGES TO OF		Change	Addition	CR2E034 (11)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P COMBALUZIER, GEORGE L 2112 COUNTRY CLUB PRADO CORAL GABLES FL 33134 S FIGUERAS, MARIA 62 S.W. 132ND CT.	DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	ST-ZIP	ADDITIONS/CHANGES TO OF	· ·	Change	Addition Addition	CR2E034 (11)
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14. 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 annual report or supplemental annual 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 faceiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

- 4/-9 (3W) 266.