

FILED
Jan 30, 2006 8:00 am
Secretary of State

00000114

[illegible]

01112006 Chg-P CR2E034 (11/05)

4. FEI Number 59-1785433	Applied For
	Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
or May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS
-----	------------------------

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	☒ Deleted
NAME	PAVICIC, MARCO	
STREET ADDRESS	3310 SW 58TH STREET	
CITY - ST - ZIP	OCALA, FL 34474	

TITLE	EVP	☐ Deleted
NAME	ROWE, PHYLLIS	
STREET ADDRESS	9550 SW 32ND COURT	
CITY - ST - ZIP	OCALA, FL	

TITLE	VS	☐ Delete
NAME	PAVICIC, KATICA	
STREET ADDRESS	3310 SW 58TH STREET	
CITY - ST - ZIP	OCALA, FL 34474	

TITLE	VPS	☐ Delete
NAME	PAVICIC, ALBINA	
STREET ADDRESS	4975 SW 36 LANE	
CITY - ST - ZIP	OCALA, FL 34474	

TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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

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

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

TITLE	VP	☒ Change	☐ Addition
NAME			
STREET ADDRESS	4260 SW 58th Avenue		
CITY - ST - ZIP	Ocala Fl. 34474		

TITLE	\$	☐ Change	☒ Addition
NAME	PAULIC PHILIP		
STREET ADDRESS	3310 SW 58th STREET		
CITY - ST - ZIP	MIAMI FL 33147		

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information included 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 10 or Block 11 if changed, or on an attachment with an address, with all of the like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone #