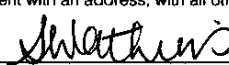


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2007 8:00 am
Secretary of State

03-14-2007 90040 006 ****61.25

DOCUMENT # 727675 1. Entity Name OCALA EAST VILLAS, INCORPORATED					
Principal Place of Business 191 NE 63RD COURT OCALA, FL 34470 US			Mailing Address 191 NE 63RD COURT OCALA, FL 34470 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2091968	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent APPLEGATE, WILLIAM B 6495 NE 1ST. LANE OCALA, FL 34470			7. Name and Address of New Registered Agent Name RICHARD YOUNG Street Address (P.O. Box Number is Not Acceptable) 560 NE 63RD CRT OCALA FL 34470 City FL Zip Code		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE   3/12/07 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHANKS, EUGENE 232 NORTHEAST 63 COURT Ocala, FL 34470	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT YOUNG, RICHARD 560 63RD CT Ocala FL 34470	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LARICKS, LAWRENCE 6571 NORTHEAST 2 PLACE Ocala, FL 34470	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT EDWARD L. SMITH JR 615 NE 63RD CT. Ocala FL 34470	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINGGREN, CHRIS 6365 NORTHEAST 1 PLACE Ocala, FL 34470	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY BLACKSHAW, THERESA C. 561 NE 64th AVE. Ocala FL, 34470	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENWELL, STEVE 95 NORTHEAST 64 TERRACE Ocala, FL 34470	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR WEMBER, CARLETON A. 417 NE 64 AV Ocala, FL 34470	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLYNN, JEAN 520 NE 63RD CT. Ocala, FL	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER WATKINS, SYBIL 6580 NE 1ST LANE Ocala FL 34470	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SCHULTZ, ERIC F 340 NE 64TH AVE. Ocala, FL	☒ Delete			
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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  Treasurer 3/12/07 352-877-0013 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					