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Jul 02 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 743682 (7)  
1. Corporation Name  
OCALA SINGLES CLUB, INC.



Principal Place of Business: 9510 NE 28TH LN SILVER SPRINGS FL 34488  
Mailing Address: 9510 NE 28TH LN SILVER SPRINGS FL 34488

3. Date Incorporated or Qualified: 07/24/1978  
4. FEI Number: 23-7434870  
Applied For: Not Applicable

2. Principal Place of Business: 21 SAME AS ABOVE  
2a. Mailing Address: 26 P.O. Box 1288 SILVER SPRINGS 34489  
22 Suite, Apt. #, etc.  
23 City & State  
24 Zip 25 Country

5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees  
7. Is this nonprofit corporation a homeowners association? Yes No  
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent  
KRIM, FRED J.  
121 N.W. 3RD. STREET  
OCALA FL 82870

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S HANSLEY, FRANCES H 1935 NE 17 PL OCALA FL	1.1 TITLE	S. JENNY VEYON 6965 NE 2nd LOOP OCALA, FL 34470
NAME	D HART, DORIS L 7101 30 W ANTHONY RD OCALA FL	1.2 NAME	D ARCHIE JOHNSON 2450 SW 38th AVE OCALA, FL 34474
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	T MEYERS, THELMA 1638 N.E. 15TH TERR OCALA FL	2.1 TITLE	T SAME
NAME	P TONN, LARRY 14480 N 441 CITRA FL	2.2 NAME	P CHUCK BIRKHEIMER 710 NE 43rd ST OCALA, FL 34479
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D MARSCHELL, GIRTON 1638 NE 15TH TERRACE OCALA FL	3.1 TITLE	D BARBARA HOPKINS 12372 SE 85th ct. BELLEVUE, FL 34420
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D HARDIN, SUE 3030 SW 85TH ST OCALA FL	4.1 TITLE	D. michelle ELAND P.O. Box 541 Keystone Heights, FL 32056
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	

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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

THELMA MEYERS

CR2E037 (10/97)