

FILE NOW: FILING FEE IS \$61.25

FILED  
Jan 30 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 757827 (1)  
1. Corporation Name  
OJC HOME OWNERS ASSOCIATION NO. 1, INC.



Principal Place of Business Mailing Address  
P.O. BOX 2495 Ocala FL 34478 US  
P.O. BOX 2495 Ocala FL 34478-2495 US

2. Principal Place of Business  
21 2516 S.W. 27th Ave.  
Suite, Apt. #, etc.  
22 P.O. Box 2495  
City & State  
23 Ocala, FL  
Zip Country  
24 34474 25 USA

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip Country  
29 30

3. Date Incorporated or Qualified 05/01/1981  
3a. Date of Last Report 02/14/1996  
4. FEI Number 59-2212945 Applied For Not Applicable  
5. Certificate of Status Desired \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent  
DAY, JAMES E.  
2516 SW 27TH AVE  
OCALA FL 34474

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 the applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	D
NAME	WIERSUM, MARLEEN	1.2 NAME	
STREET ADDRESS	17045 NW 87TH AVE RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	REDDICK FL	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	
NAME	HAWLEY, DON	2.2 NAME	
STREET ADDRESS	17072 NW 86TH TER	2.3 STREET ADDRESS	
CITY-ST-ZIP	REDDICK FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	LACROIX, BARBARA	3.2 NAME	
STREET ADDRESS	17070 NW 86TH TERR	3.3 STREET ADDRESS	
CITY-ST-ZIP	REDDICK FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	D
NAME	FULLER, RHONDA	4.2 NAME	Porter, Ralph
STREET ADDRESS	17154 NW 86TH TERR	4.3 STREET ADDRESS	17119 N.W. 86 Terr.
CITY-ST-ZIP	REDDICK FL	4.4 CITY-ST-ZIP	Reddick, FL 32686
TITLE	STD	5.1 TITLE	D
NAME	HARMA, VIRGANIA	5.2 NAME	
STREET ADDRESS	17182 NW 87TH AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	REDDICK FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	S/T
NAME		6.2 NAME	Day, James E.
STREET ADDRESS		6.3 STREET ADDRESS	2516 S.W. 27th Ave.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Ocala, FL 34474

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14. I do 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.

*James E. Day*

CR2E037 (9/96)