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(City/State/Zip/Phone #)				
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	03/23/0501029013 **52.50			
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

SUBJECT: _____ RIDGE OF OCALA, LTD.

(Name of Limited Partnership)

DOCUMENT NUMBER: A98000002700

The enclosed Certificate of Cancellation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GEORGE R, McCOY

(Name of Person)

UNIVERSAL DEVELOPMENT OF OCALA, INC.

(Firm/Company)

7 E SILVER SPRINGS BLVD, - STE 208 (Address)

OCALA, FL 34470

(City/State and Zip Code)

For further information concerning this matter, please call:

 GEORGE R. McCOY
 at (352)
 732-3550

 (Name of Person)
 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$52.50 Filing Fee	\$61.25 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert		द्राः d) = हु च्यासम्ब ्रायम् र
Registr Divisio 409 E.	ET ADDRESS: ation Section n of Corporations Gaines Street ssee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	P 3 0-	्र २

CERTIFICATE OF CANCELLATION FOR

LAUREL RIDGE OF OCALA, LTD

(Insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.113, Florida Statutes, this Florida limited partnership, whose certificate was filed with the Florida Department of State on $\sqrt{3-21-05}$, hereby submits this Certificate of Cancellation.

FIRST: Reason for cancellation: (State why partnership is submitting cancellation) PARTNERSHIP WAS LIQUIDATED ON 12/31/04.

SECOND: This Certificate of Cancellation shall be effective at the time of its filing with the Florida Department of State.

THIRD: Signatures of all general partners:

GEORGE R. McCOY, SEC,



UNIVERSAL DEVELOPMENT OF OCALA, INC.