## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Bandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F52781

(4)

Mailing Address

BUSINESS COMMUNITIES, INC.

FILED
Apr 16 1998 8:00am
Secretary of State



| LEEWARD. JAMES K<br>7801 S E 58TH AVENUE<br>OCALA FL 34480-7727<br>US   |   | LEEWARD. JAMES K<br>7801 S E 58TH AVENUE<br>OCALA FL 34480-7727<br>US  |                                  | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  11/05/1981  |                     |  |
|---|---|--|----------------------------------|--|---------------------|--|
| 2. Principal Place of Business  |   | 2n. Mailing Address  |                                  | 4. FEI Number  | Applied For         |  |
| 21  |   | 26   |                                  | 62-1137708   | Not Applicable      |  |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.  |                                  | 5. Certificate of Status Desired Security Securi |                     |  |
| City & State  |   | City & State   |                                  | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees   |                     |  |
| Zip<br>24   | Country<br>25                                 |  | Country<br>10                    |  | Yes No              |  |
| 9. Name and Address of Current Registered Agent   |   |  |                                  | 10. Name and Address of New Registered Agent   |                     |  |
| LEEWARD, JAMES K  |   |  | 81 Name                          |  |                     |  |
| 7801 SE 58TH AVE  |   |  | 82 Street                        | Address (P.O. Box Number is Not Acceptable)  | ·                   |  |
| OCALA FL 34480  |   |  | 83                               |  |                     |  |
|   |   |  |                                  |  |                     |  |
|   |   |  | 84 City                          | FL   | 85 Zip Code         |  |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. |   |  |                                  |  |                     |  |
| SIGNATURE   |   |  |                                  |  |                     |  |
|   | Signature, typed or printed name of registers |  |                                  | required when reinstating) DATE  |                     |  |
| 12.   | D   | S AND DIRECTORS  | 13.                              | ADDITIONS/CHANGES TO OFFICERS AND  |                     |  |
| TITLE<br>NAME   | PERRY, J A                                    | X DELETE   | 1.1 TITLE                        |  | Change Addition     |  |
| STREET ADDRESS  | RT 1 BOX 3470                                 |  | 1.2 NAME<br>1.3 STREET ADDRESS   |  |                     |  |
| CITY-ST-ZIP   | BELLEVIEW, FL 00000                           |  | 1.4 CITY-ST-ZIP                  |  |                     |  |
| TITLE   | OP  | DELETE   | 2.1 TITLE                        |  | Change Addition     |  |
| NAME  | LEEWARD, JAMES K                              |  | 2.2 NAME                         |  | ·                   |  |
| STREET ADDRESS  | <del>-2400-9</del> .E:-77H-07+                |  | 2.3 STREET ADDRESS               | 1930 SE Clatter Bridge Road  |                     |  |
| CITY-ST-ZIP   | OCALA, FL 00000                               |  | 2. 4 CITY-ST-ZIP                 | Ocala FL 344   | 71                  |  |
| THILE   | VAS   | ☐ DELETE   | 3.1 TITLE                        | D,   | Change & Addition   |  |
| NAME  | PERRY, J.A.                                   |  | 3.2 NAME                         | , , , , , , , , , , , , , , , , , , ,  |                     |  |
| STREET ADDRESS  | 7547 SE 110TH ST                              |  | 3.3 STREET ADDRESS               |  |                     |  |
| CITY-ST-ZIP   | BELLEVIEW FL                                  | Tan rec  | 3.4. CITY - ST - ZIP             |  |                     |  |
| TITLE   | S<br>Curry, Landis V Jr                       | DELETE   | 4.1 TITLE                        |  | Change Addition     |  |
| NAME<br>OXOGET ADDRESS  | 21 N E 1ST AVE                                |  | 4. 2 NAME                        |  |                     |  |
| STREET ADDRESS  | OCALA, FL 00000                               |  | 4.3 STREET ADDRESS               |  |                     |  |
| CITY-ST-ZIP<br>TITLE  | OUNEN, 1 E 00000                              | DELETE   | 4.4 CITY - ST - ZIP<br>5.1 TITLE |  | ☐ Change ☐ Addition |  |
| NAME  |   | occur  | 5.1 MILE<br>5.2 NAME             |  |                     |  |
| STREET ADDRESS  |   |  | 5.3 STREET ADDRESS               |  |                     |  |
| CITY-ST-ZIP   |   |  | 5.4 CITY-ST-ZIP                  |  |                     |  |
| TITLE   | · · · · · · · · · · · · · · · · · · ·         | ☐ DELETE   | 6.1 TITLE                        |  | Change Addition     |  |
| NAME  |   | <del></del>  | 6.2 NAME                         |  | - <del>-</del>      |  |
| STREET ADDRESS  |   |  | 6.3 STREET ADDRESS               |  |                     |  |
| CITY-ST-ZIP   |   | ·  | 6.4 CITY-ST-ZIP                  |  |                     |  |
| dd Ibaaabii   | artifus that the information assembly         | and a state of the different and a second as a second of the second of t | 41                               | die O-N- 440 OT/O/O Frede Out ( 14 d   |                     |  |

indicated on this annual report or supplied with this tiling does not quality 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 trastee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 changed, or on an attachment with an address.

CONATURE BY

41,0198

3RZE034 (10/97