## 2-18-97 B-2026 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9400006532 (5)

OCALA, INC.

			**************************************						
Principal Place of Business Mailing Address					-	T TOBLEGO STEW SALLY MINES WHERE MALE MALE MALE MALE MALE MALE MALE MAL	<b>40()) 421/9</b>	81191 <b>81198</b> 1111 <b>8</b>	1101 1001
P.O. BOX 8603 PLANO TX 750									
				`		3. Date Incorporated or Qualified 12/21/1994		ate of Last Re <b>27/1996</b>	eport .
2, Principal F	lace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21	44	26			<del></del>	75-2571407			t Applicable
Suite, Apt		Suite, Apt. #, etc.	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	(6)	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zφ	Country	Zip	Country	,		8. This corporation has liability for i	ntangible		
24	25	29	30			Florida Statutes		] No	
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gistered	Agent	
	ers, ron Mr		81	Na	ime				
607 N.W. 27TH AVENUE				Sti	reet Addre	ess (P.O. Box Number is Not Acceptab	le)		<u>-</u>
UC	ALA FL 34475		83	ļ	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	······································		<del></del>
			84	Cit	lv			85 Zip (	`ode
				"	.,		FL	. Jos 2. p .	2000
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508, Florida Statute	s, the abov	e-nai	med corpo	pration submits this statement for the p	urpose o	f changing it	s registered
agent. La	arn familiar with and accept the bulg	garions of, Section 607.0505, Flor	rida Statute	, u 16 \$.	·	on's board of directors. I hereby accep	I app	/	i ogistorou
SIGNATURE	* Indiala 138	LULLO				<i></i>	/9/	97	
				ent sig	nature require	d when reinstating)	DATE		6 11 14
12.	OFFICERS AF	ND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC	EHS ANL	Change	S IN 12
TITLE	EWERS, RON	[] UCLETE	1.1 TITLE		1	RIAN DAY		L) Change	
NAME PAGEST AS INCOME.	2500 N.W. 10TH ST.		1.2 NAME			947 AVEK.			
STREET ADDRESS	OCALA FL 34475		1.3 STREET		, .	PLANO, TX 75086.	1220		
CHY-S1-ZIF TITLE	V	DELETE	1.4 CITY - S 2.1 TITLE	1 - ZIP		P 47-00, 1 X 1-3000-	<i>U1</i> /	Change	Addition
NAME	BARRACLOUGH, BOB		2.2 NAME						
STREET ADDRESS	APPAR ALLE ARTIEST			2 3 STREET ADDRESS		•	1 × V		
CITY SI-7P	OCALA FL 34475	E) 04476		2 4 CiTY-SY-ZIP					
TITLE	8	DELETE	31 TITLE					Change	Addition
NAME	BARTON, MICHELE	<i>/</i>	3.2 NAME						
STREET ADDRESS	1947 AVE. K		3.3 STREET	ADDR	iess				
CITY - ST - ZIP	PLANO TX 75086-0709		3.4 CITY-	SY-ZIF			···		
TITLE	CEO	DELETE	4.1 TITLE					Change	Addition
hame	WHITSON, DON E	7	4. 2 NAME						
STREET ADDRESS	1947 AVE. K		4.3 STREE	ADDA	RESS				
CITY-ST-7IP	PLANO TX 75086-0709		4.4 CiTY-5	T-21P					
THILE		☐ DELETE	5.1 TITLE					Change	Addition
NAME			5.2 NAME		ļ				
STREET ADDRESS			53 STREE						
CiTY+S*+ZIP		T bolete	5.4 CITY-5	iT-ZIP				TT Change	A Address
Tille		☐ DELETE	6.1 TITLE		- 1			Change	Addition
NAME			6.2 NAME	1000	,ccc				
STREET ADDRESS			6.3 STREE		- 1				
City St-2iF	I hy certify that the information remeti	ed with this filing does not qualify	for the exe	******		in Section 119.07(3)(i), Florida Statutes	s I furtho	r certify that	the
informati Lam an c	on inclicated on this annual report or	supplemental annual report is tri or the receiver or trustee empower	ue and acc ered to exe	urate	and that	my signature shall have the same lega as required by Chapter 607, Florida S	l effect a	s if made und	der oath; that

SIGNATURE: X Sould & Cure will

1/9/92 352-629-502.0

**FILED** 

Feb 18 1997 8:00am

Secretary of State