## 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 # G62915

(5)

PADDOCK PARK DEVELOPMENT, INC.

FILED
Jan 24 1997 8:00am
Secretary of State



Principal Plac		Mailing Address							
3300 S.W. 34TH AVENUE. SUITE #148 P. O. BOX 367 OCALA FL 34474 OCALA FL 34478-0367 US US									
						3. Date Incorporated or Qualified			
2. Principal Place of Business 2a, Mailing Address						4, FEI Number			pplied For
21		26				59-2335551			ot Applicable
Suite, Apt. #, etc.   Suite, Apt. #, etc.   27						5. Certificate of Status Desired			Additional equired
City & Stat	е	City & State				6. Election Campaign Financing			
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip Country		Zıp	Zιρ Country			8. This corporation has liability for intangible tax under s. 199.032,			
24			30			Florida Statutes X Yes No			
	9. Name and Address of Curren	nt Registered Agent		81	N	10. Name and Address of New Re	istered /	Agent	
	MER, MARGARET		ľ	וים	Name				
	SOUTHEAST 15TH AVENUE		ľ	82 Street Addr		ess (P.O. Box Number is Not Acceptab	le)		
OC/	ALA FL 34471		ļ	83					
				63					
			[	64	City		FL	85 Zip	Code
44 Discount	to the symic per of Continue 607.000	2) and 602 1509 Clared State	too the ab		aamad aara	oration submits this statement for the p		obanajaa i	ta sociotosod
SIGNATURE	en familiar with, and accept the oblig-	int and lide if applicable (NC				ad when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE EDC AND	DIRECTO	PS IN 12
<b>12.</b>	OFFICERS AND DIRECTORS  DELETE			13. 11 TITLE		ADDITIONS/CHANGES TO OFFIC	ENS AND	Change	Addition
NAME	PALMER, WHITFIELD M JR		12 NA					ting onengo	
STREET ADDRESS	3300 SW 34TH AVE #148		1	-	address				
CITY-S1-ZIP	OCALA FL 34474		1.4 CIT						
IfILE			2.1 111					Change	Addition
NAME	GLANZER, DOROTHY		2.2 NA	ME					
STREET ADDRESS	3300 S.W. 34TH AVE., S-148		2.3 ST	REFT	ADDRESS	·			
CITY - S1 - ZIP	OCALA FL 34474		2 4 CI	TY - \$	ST-ZIP				
TITLE	VD	DELETE	3.1 TIT	LE		1.	•	Change	Addition
NAME	AYRES, MARGARET PALMER		3.2 NA	ME	]				
STREET ADDRESS	1318 SE 8TH STREET		1		ADDRESS (				
CITY - SY - ZIP	OCALA FL 34471	DELETE	3.4. CI		ST-ZIP		<del></del>	Change	Addition
TITLE	D Palmer, Margaret		4.1 TIT					□ rustige	Magalian
NAME CODEST ADDRESS	709 SOUTHEAST 15TH AVEN	HF	4. 2 NA		ADDRECC				
STREET ADDRESS CITY-ST-ZIP	OCALA FL 34471	<u></u>	4 4 CI		ADDRESS				
TILLE	V	DELETE	51 TIT		Δ11			Change	Addition
NAME	BARBER, JON K.	•	52 NA		}				**
STREET ADDRESS	3300 S.W. 34TH AVE., S-148				ADDRESS				
CITY-ST-ZIP	OCALA FL 34474		5.4 CIT						
TITLE		DELETE	6.1 T(T					Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 ST	REFT	ADDRESS				
CITY+S1-ZIP			6 4 CH	ry-\$	iT - ZIP				
	the state of the s		100 0 00			in Continu 440 07/07/11 Clarida Ctabula			

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

352-237-6145

Daytime Phone #