

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G62915

1. Entity Name

PADDOCK PARK DEVELOPMENT, INC.

**FILED**  
**Jan 19, 2000 8:00 am**  
**Secretary of State**

01-19-2000 90177 019 \*\*\*150.00

Principal Place of Business

Mailing Address

3233 SW 33RD ROAD  
STE 201  
OCALA FL 34474-459  
US

P. O. BOX 367  
OCALA FL 34478-0367  
US

00004832



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2335551**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PALMER, MARGARET  
709 SOUTHEAST 15TH AVENUE  
OCALA FL 34471

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME PALMER, WHITFIELD M JR  
STREET ADDRESS 3233 SW 33RD ROAD STE 201  
CITY-ST-ZIP Ocala FL 34474 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S  
NAME GLANZER, DOROTHY  
STREET ADDRESS 3233 SW 33RD ROAD STE 201  
CITY-ST-ZIP Ocala FL 34474 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD  
NAME AYRES, MARGARET PALMER  
STREET ADDRESS 1318 SE 8TH STREET  
CITY-ST-ZIP Ocala FL 34471 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D  
NAME PALMER, MARGARET  
STREET ADDRESS 709 SOUTHEAST 15TH AVENUE  
CITY-ST-ZIP Ocala FL 34471 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V  
NAME BARBER, JON K.  
STREET ADDRESS 3233 SW 33RD ROAD STE 201  
CITY-ST-ZIP Ocala FL 34474 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Dorothy Glanzer

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/00

Date

352-237-6145

Daytime Phone #

CR2E034 (9/99)