

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H30171

Entity Name: OCALA BEDROCK, INC.

**FILED**  
**Feb 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2441 E. FORT KING ST  
SUITE 202  
OCALA, FL 344712558 US

**New Principal Place of Business:**

**Current Mailing Address:**

2441 E. FORT KING ST  
SUITE 202  
OCALA, FL 344712558 US

**New Mailing Address:**

FEI Number: 59-2484607

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LANKER, DARRYL C  
2026 SE TWIN BRIDGES CT  
OCALA, FL 34471 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: LANKER, DARRYL C  
Address: 2026 SE TWIN BRIDGES CT  
City-St-Zip: OCALA, FL 34471 US

Title: S  
Name: LANKER, RACHAEL Y  
Address: 2026 SE TWIN BRIDGES COURT  
City-St-Zip: OCALA, FL 34471 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DARRYL C. LANCKER

P

02/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date