

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

FILED

Apr 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **J24681**

(5)

1. Corporation Name

FIRST OCALA INVESTMENT CORP.

Principal Place of Business

**% DAVID E. KUENDIG
7846 NW 136TH TERRACE
OCALA FL 32675**

Mailing Address

**% DAVID E. KUENDIG
7846 NW 136TH TERRACE
OCALA FL 34482-1710**

3. Date Incorporated or Qualified

07/18/1986

3a. Date of Last Report

04/12/1996

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

**KUENDIG, DAVID E.
7846 NW 136TH TERRACE
OCALA FL 32675**

10. Name and Address of New Registered Agent

81 Name

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

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 registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

**ST
KUENDIG, MARY LOUISE
7846 NW 136 TERR
OCALA FL**

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

**V
NYBERG, MYRA
3924 N JANSSEN
CHICAGO IL**

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

**V
FLANAGAN, KATHLEEN
52 MOORELAND ROAD
SCITUATE MA**

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

**P
KUENDIG, DAVID
7846 NW 136 TERR
OCALA FL**

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

**V
NYBERG, ANDERS
3924 N JANSSEN
CHICAGO IL**

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

**V
SCHUCARD, PETER
53 BRADLEY HILL RD.
HINGHAM MA**

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. 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:

Marylouise Kuendig (Sec Treas) 4-10-97

Date

352
6222359

Daytime Phone #

0441964

CR2E034 (9/96)