

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 19, 1999 8:00 am  
Secretary of State

04-19-1999 90124 033 \*\*\*150.00

DOCUMENT # J24681

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 32675

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/18/1986

4. FEI Number

59-2701981

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 4778 Halifax Dr  
Suite, Apt. #, etc.

2a. Mailing Address

26 4778 Halifax Dr  
Suite, Apt. #, etc.

23 City & State

Port Orange FL

27 City & State

Port Orange FL

24 Zip

32127

25 Country

Volusia

29 Zip

32127

30 Country

Volusia

9. 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)

4778 Halifax Dr

83

84 City Pt. Orange

FL

85 Zip Code

32127

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 ☐ DELETE

NAME ST  
KUENDIG, MARY LOUISE  
STREET ADDRESS 7846 NW 136 TERR  
CITY-ST-ZIP OCALA FL

TITLE ☐ DELETE

NAME V  
NYBERG, MYRA  
STREET ADDRESS 3924 N JANSSEN  
CITY-ST-ZIP CHICAGO IL

TITLE ☐ DELETE

NAME V  
FLANAGAN, KATHLEEN  
STREET ADDRESS 52 MOORELAND ROAD  
CITY-ST-ZIP SCITUATE MA

TITLE ☐ DELETE

NAME P  
KUENDIG, DAVID  
STREET ADDRESS 7846 NW 136 TERR  
CITY-ST-ZIP OCALA FL

TITLE ☐ DELETE

NAME V  
NYBERG, ANDERS  
STREET ADDRESS 3924 N JANSSEN  
CITY-ST-ZIP CHICAGO IL

TITLE ☐ DELETE

NAME V  
SCHUCARD, PETER  
STREET ADDRESS 53 BRADLEY HILL RD.  
CITY-ST-ZIP HINGHAM MA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 4778 Halifax Dr  
1.4 CITY-ST-ZIP Port Orange FL 32127

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS 4778 Halifax Dr  
4.4 CITY-ST-ZIP Port Orange FL 32127

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

17 Rivers Edge Rd  
Hull, Mass 02045

14. 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 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, with all other like empowered.

SIGNATURE: Mary Louise Kuendig (ST)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-6-99 9043049320

CR2E034 (1/1/98)