**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # K33136

CRICKET'S LAND INVESTMENT COMPANY

Principal Place of Business		Mailing Address							
5841 W HWY 4	0	5841 W HWY 40							
OCALA FL 3448	32	OCALA FL 34482				DO NOT WRITE IN THIS CRACE			
US		US	US			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 09/15/1988			
2. Principal Pl	lace of Business	2a. Mailing Address			·	4. FEI Number	App	ied For	
21		26				59-2924390	Not	Applicable	
Suite, Apt#, etc		Suite, Apt-#, etc.				\$8.75 Additional			
22		27				5. Certificate of Status Desired	ee Req	uired	
City & State		City & State				6. Election Campaign Financing \$	5.00 N	lav Be	
23		28				1 - 1 - 1	dded to	·	
Zip	Country	Zip Country				8. This corporation owes the current year Intangible	3		
24	25	29 3	10			Personal Property Tax.	s J	₹No	
27	9. Name and Address of Curren	11				10. Name and Address of New Registered Agent			
5. Haile and Address of Surface Hogistales Agent					Name				
MCKAMEY, DONALD L.				1					
5841	I W HWY 40		82 Street Ad			ess (P.O. Box Number is Not Acceptable)			
OCA	LA FL 34482		83	3					
			84	4	City	FL  85	Zip Co	de	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	s, the above	ve-	named corpor	oration submits this statement for the purpose of chang	ing its re	gistered	
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such chappe was aut	horized by	v th	ne corporation	n's board of directors. I hereby accept the appointment	as regi	stered	
ļ	III tarillar with and accept the conga							J	
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable (NOTE: F	Registered Age	ent s	signature required v	when reinstating) DATE			
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIR	ECTOR		
TITLE	Р	☐ DELETE	1.1 TITLE				nange	☐ Addition	
NAME	MCKAMEY, DONALD L.		1.2 NAME						
STREET ADDRESS	5841 W HWY 40		1.3 STREE	ĒΤΑ	ADDRESS				
CITY-ST-ZIP	OCALA FL 34482		1.4 CITY-1	ST-2	ZIP				
TITLE	ST DELETE						nange	☐ Addition	
NAME	RENFROE, ROD		2.2 NAME						
STREET ADDRESS	3230 SE 10 ST., LOT 7		2.3 STREE		ADDRESS ~			ł	
	OCALA FL		2. 4 CITY-						
CITY-ST-ZIP	CONDATE	☐ DELETE	3.1 TITLE		-211	ПС	nange	Addition	
1			3.2 NAME				•	_	
NAME					ADODESS				
STREET ADDRESS			3.3 STREE						
CITY-ST-ZIP		☐ DELETE	3.4. CITY- 4.1 TITLE		-412		nange	Addition	
TITLE			1				ye		
NAME	<i>'</i>		4. 2 NAME						
STREET ADDRESS		SIGN	4.3 STREI					į	
CITY-ST-ZIP		<u> </u>	4.4 CITY-		ZIP				
TITLE		HERE DELETE	5.1 TITLE				nange	☐ Addition	
NAME			5.2 NAME						
STREET ADDRESS	[ · · · · · · · · · · · · · · · · · · ·	: n			ADDRESS				
CITY-ST-ZIP		· {4 : · · ·	5.4 CfTY-		ZIP				
TITLE		DELETE	6.1 TITLE			□c	nange	☐ Addition	
NAME		NL.	6.2 NAME						
STREET ADDRESS		\7	6.3 STREE	ET A	ADDRESS				

14. I hereby certify that the information supplied with this filing toes 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 operiver 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 a stage ment at the anaddress, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90028 035 \*\*\*150.00