

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K62041 (4)

1. Corporation Name

SOUTHLAND PROPERTIES OF OCALA, INC.



Principal Place of Business

Mailing Address

% ERNEST FRIEDMAN  
330 COFFEE POT RIVIERA  
ST. PETERSBURG FL 33704

C/O JAY KAUFFMAN CPA  
5999 CENTRAL AVENUE SUITE 203  
ST PETERSBURG FL 33704

3. Date Incorporated or Qualified

01/31/1989

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 5135 34TH ST S

25 Suite, Apt. #, etc.

22 City & State

27 Suite, Apt. #, etc.

23 ST. PETERSBURG, FL

28 City & State

24 Zip

25 Country

29 Zip

30 Country

33711

PINELLAS

29

30

4. FEI Number

59-2942332

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FRIEDMAN, ERNEST  
C/O JAY KAUFFMAN CPA  
5999 CENTRAL AVENUE SUITE 203  
ST. PETERSBURG FL 33710

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 NAME ☐ DELETE

P  
FRIEDMAN, ERNEST L  
330 COFFEE POT RIVIERA  
ST. PETERSBURG FL 33704

TITLE NAME ☐ DELETE

VD  
GRIECO, NICHOLAS  
743 PINELLAS BAYWAY  
TIERRA VERDE FL

TITLE NAME ☐ DELETE

TITLE NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

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

4750 DOLPHIN CAY LANE SOUTH  
ST. PETERSBURG, FL 33711

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-24-96 87864-1129

CR2E034 (12/95)