

7-17-97 B-7958 C
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Jul 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L69033** (3)
1. Corporation Name
OCALA DIESEL, INC.

Principal Place of Business % VERNAM'S GARAGE & TRUCK SALES 2020 N.W. 31ST ST OCALA FL 32675	Mailing Address % VERNAM'S GARAGE & TRUCK SALES 2020 N.W. 31ST ST OCALA FL 34475-3343
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3. Date Incorporated or Qualified 04/26/1990	3a. Date of Last Report 02/27/1996
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2. Principal Place of Business 21 2020 NW 31ST ST Suite, Apt. #, etc. 22 N/A City & State 23 OCALA FL Zip 24 34475	2a. Mailing Address 25 SAME Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30 USA
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4. FEI Number 59-3007711	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**BLANCHARD, CUSTURERI, MERRIAM & ADEL, P.A.
44 SE 1ST AVENUE
OCALA FL 32671**

10. Name and Address of New Registered Agent 81 Name John N. VERNAM III 82 Street Address (P.O. Box Number is Not Acceptable) 4730 SW 3RD AVE 83 84 City OCALA FL 85 Zip Code 34475
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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 *John N. Vernam III*
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	DVT <input type="checkbox"/> DELETE
NAME	VERNAM, JOHN N. III
STREET ADDRESS	4730 SW 3RD AVE
CITY-ST-ZIP	OCALA FL
TITLE	PS <input type="checkbox"/> DELETE
NAME	DUBOIS, JOHN
STREET ADDRESS	2111 SHADOW RIDGE DRIVE
CITY-ST-ZIP	DELTONA FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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, unchanged, or on an attachment with an address.

SIGNATURE: *John N. Vernam III*

CR2E034 (9/96)