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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M87791

37791 (3)

AUTO RANCH OCALA, INC.

FILED Apr 21 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address						
% JANE S. POTTER 1707 S.W. 7TH AVE.		% JANE S. POTTE	% JANE S. POTTER					
		1707 S.W. 7TH AVE.				DO NOT INDITE HIT IND ODIO		
OCALA FL 34474		OCALA FL 34474			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified		
2 Principal P	lace of Business	Do Mailing Address				06/30/1988		
	IACE OF EXISTRESS	2a. Mailing Addres	S			4. FEI Number		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.				59-2893766		Vot Applicable
22		h	27			5. Certificate of Status Desired		Additional Required
City & State		·	City & State					
23		} *	[28]			Election Campaign Financing Trust Fund Contribution		May Be
Zip Country		7ip						to Fees
24	25	29	30	, G, III y		 This corporation owes or has paid the Personal Property Tax due June 30. 	— ′	ntangible No
124	9. Name and Address of Current Registered Agent		1301	<u>-</u>		10. Name and Address of New Registered Agent		
PO	TTER, JANE S.			81	Name			
1707 S.W. 7TH AVE.							 	
	ALA FL 32674		82 Street Ad		Street Add	Iress (P.O. Box Number is Not Acceptable)		ļ
00	THE SCOTT			83		· · · · · · · · · · · · · · · · · · ·	 	
]								
				84	City		FL 85 Zip	Code
11 Pursuant	to the provisions of Sections 607.0	25.02 and 607 15.09 Clorida	Clatutes the		nomed oor			91-121-141-12
office or re	egistored agent, or both, in the St	ate of Florida. Such change	was authorize	ed by ti	he corpora	poration submits this statement for the purportion's board of directors. I hereby accept the	ose of changing e appointment a	s registered
agent. i a	m familiar with, and accept the ob	aligations of, Section 607.05	05, Florida Sta	atutes.				
SIGNATURE	Signature, typod or printed name of registered	I remain rest title it are do atile.	(NOTC) Desistan	ad Keast		ired when reinstating) D.	ATE	
12.		AND DIRI CTORS	13.		signatore requ	ADDITIONS/CHANGES TO OFFICERS		BS IN 12
TITLE	STD	DELE		TITLE		ACCITIONS/OFFANGES TO OFFICER	Change	Addition
NAME	POTTER, DONOVAN L.			NAME			<u> </u>	
STREET ADDRESS	2740 S.W. 7TH AVE.			STREET AU	ODBESS			
CITY-ST-ZIP	OCALA FL			CHTY-ST-	l			Į.
TITLE	PD DELETE			2.1 TITLE			☐ Change	Addition
NAME	POTTER, JANE S.		221	NAME				
STREET ADDRESS	2740 S.W. 7TH AVE.			STREET AD	IDRESS			
CITY-ST-ZIP	OCALA FL			CITY-ST-				
TITLE		DELE					Change	Addition
NAME				NAME				
STREET ADDRESS			3.3 9	STREET AD	ODRESS			
CITY-ST-ZIP				CITY-ST-				
TITLE		☐ DELE					☐ Change	Addition
NAME			4.21	NAME	}			-
STREET ADDRESS				STREET AD	DDRESS			
C(TY-ST-ZIP				CITY-ST-				
TITLE		☐ DELE					Change	☐ Addition
NAME			52 N					
STREET ADDRESS				STREET AD	DRESS			
CITY-ST-ZIP				X1Y-S1-7				ļ
TITLE		DELET					Change	☐ Addition
NAME			6.2 N					
STREET ADDRESS				TREET AD	DORESS			ŀ
CITY-ST-ZIP			B		i			
0111-01-217		:	D.4 C	HY-ST-Z	eir L			

I. 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 conjugation or the receiver or transfer does enjoyed 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 orderess.

C. OH 41 1506 /2 - 1 4 - 1 1/00