

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N97000000927 (0)

1. Corporation Name

PADDOCK CENTER PROPERTY OWNERS' ASSOCIATION, INC

Principal Place of Business

Mailing Address

ATTN: ROY T. BOYD III
1314 SW 17TH STREET
OCALA FL 34474-3531

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1314 SW 17TH STREET
OCALA FL 34474-3531

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

2a. Mailing Address

21 3019 SW 2TH Avenue

26 3019 SW 2TH Avenue

22 Suite #202

27 Suite #202

23 Ocala FL

28 Ocala FL

24 34474

25 USA

29 34474

30 USA

3. Date Incorporated or Qualified

02/17/1997

4. FEI Number

59-3536354

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

7. Is this nonprofit corporation a home owners association?

Yes No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOYD, ROY T III
1314 SW 17TH STREET
OCALA FL 34474-3531

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

3019 SW 2TH Avenue, Suite #202

83

84 City Ocala

FL

85 Zip Code 34474

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9-28-98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME BOYD, ROY T III
STREET ADDRESS 1314 SW 17TH STREET
CITY-ST-ZIP Ocala FL 34474-3531

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

3019 SW 2TH Avenue, Suite #202
Ocala FL 34474

TITLE STD ☐ DELETE

NAME YOUNG, LARRY
STREET ADDRESS 1314 SW 17TH STREET
CITY-ST-ZIP Ocala FL 34474-3531

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3019 SW 2TH Avenue, Suite #202
Ocala FL 34474

TITLE D ☐ DELETE

NAME GRAY, STEVEN H
STREET ADDRESS 125 N.E. FIRST AVE, STE 1
CITY-ST-ZIP Ocala FL 34470

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

500002674935-3
-10/28/98-01086-020
*****61.25 *****61.25

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

NOT REQUIRED

CR2E037 (10/97)