2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2007
Secretary of State

DOCUMENT# N98000001690

Entity Name: OCALA NATIONAL BANK BUILDING CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

108 NORTH MAGNOLIA AVE
SUITE 501
OCALA, FL 34475

New Principal Place of Business:

Current Mailing Address:

108 NORTH MAGNOLIA AVE
SUITE 501
OCALA, FL 34475

New Mailing Address:

FEI Number: 59-3502202 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HEATHERDALE, SHELLY O
108 N MAGNOLIA VE
SUITE 501
OCALA, FL 34475 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	TD	( ) Delete
Name:	HEATHERDALE, SHELLY OWEN	
Address:	108 NORTH MAGNOLIA AVE, STE 501	
City-St-Zip:	OCALA, FL 34475	
Title:	SD	( ) Delete
Name:	CLAEYS, JIM	
Address:	1702 NE2ND ST	
City-St-Zip:	OCALA, FL 34470	
Title:	VP	( ) Delete
Name:	MCLEAN, WILLIAM	
Address:	108 N MAGNOLIA ST SUITE 401	
City-St-Zip:	OCALA, FL 34475	
Title:	PD	( ) Delete
Name:	WANNER, DON	
Address:	108 NORTH MAGNOLIA AVE, STE 500	
City-St-Zip:	OCALA, FL 34475	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHELLY OWEN HEATHERDALE TD 05/23/2007

Electronic Signature of Signing Officer or Director — Date