2005 FOR PROFIT CORPORATION ANNUAL REPORT					FILED Jan 13, 2005 08:00 AM	
1. Entity Nar	MENT # P010	00003454	5		Secretary of State	
Principal Plac 101 NE 2NE OCALA, FL		· · · · · · - ·	tailing Address 101 NE 2ND STREET DCALA, FL 34470	·		
	· · · ·					
DO NOT WRITE IN THIS SPAC				CE	01032005 4. FEI Number 59-371 5. Certificate	
	6. Name and Address	of Current Regi	stered Agent		·····	
FARKAS, LEE B 101 NE 2ND STREET OCALA, FL 34470				DO NOT WRITE IN THIS SPACE		
 The above the obligation 	e named entity submits this tions of registered agent.	statement for the	ourpose of changing its register	ed office or register	red agent, or bot	th, In the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of	registered agent and tipe	if applicable (NOTE: Registered	d Agent signature required	d when reinstating)	DATE
After M	E NOW!!! FEE IS \$1 ay 1, 2005 Fee will	be \$550.00	9. Election Campaign Fina Trust Fund Contribution.		.00 May Be led to Fees	
10. TTLE	OFF D	ICERS AND DIRE	CTORS	- · · · ·		
NAME STREET ADDRESS CITY-ST-ZIP	FARKAS, LEE B 101 NE 2ND STREET OCALA, FL 34470	-				
TITLE NAME STREET ADDRESS CITY-ST-ZIP						01/13/05-80034-001 150.00_000
TITLE NAME STREET ADDRESS GITY-ST-ZIP	- - - -			·	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP						THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		* * <u>r</u>	<u> </u>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,				
12. I hereby o indicated of the cor	on this report of subdieme	rital report is true : Tustee emnowere	and accurate and that my signa	ture shall have the d	ama lanal attar	i), Florida Statutes. I further certify that the information t as if made under oath; that I am an officer or director s; and that my name appears in Block 10 or Block 11 if
SIGNAT		ND TYPED OR PRINTER	NAME OF SIGNING OFFICER OR DIREC	Lee B. Far ^{TOR}	rkas -	10-05 352-351 1/09 Date Daytime Phone #