

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000069921

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: OCALA AUTO SALES & LEASING, INC.

## Current Principal Place of Business:

8900 SW 105TH STREET  
OCALA, FL 34481

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 222  
OCALA, FL 34478

## New Mailing Address:

FEI Number: 59-3740282

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KING, WILLIAM ALLAN ESQ  
1531 SE 36TH AVENUE  
OCALA, FL 34471 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: STD ( ) Delete  
Name: LIGHTBODY, THOMAS W  
Address: 9080 SW 19TH AVENUE ROAD  
City-St-Zip: OCALA, FL 34476

Title: PD ( ) Delete  
Name: GRANATA, SALVATORE T  
Address: PO BOX 222  
City-St-Zip: OCALA, FL 34478

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition  
Name: LIGHTBODY, THOMAS W  
Address: 9080 SW 19TH AVENUE ROAD  
City-St-Zip: OCALA, FL 34476

Title: SD (X) Change ( ) Addition  
Name: GRANATA, SALVATORE T  
Address: PO BOX 222  
City-St-Zip: OCALA, FL 34478

Title: PD ( ) Change (X) Addition  
Name: HAMPY, DARRYL  
Address: 1706 N MAGNOLIA AVENUE, SUITE 203  
City-St-Zip: OCALA, FL 34475 US

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DARRYL HAMPY

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04/27/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date