

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90122 007 ***150.00

DOCUMENT # P01000093296

1. Entity Name

GOLDEN OCALA REAL ESTATE, INC.



Principal Place of Business

**7340 NW US HWY 27
OCALA FL 33482**

Mailing Address

**7340 NW US HWY 27
OCALA FL 33482**

2. Principal Place of Business

4090 NW 84th CT.

3. Mailing Address

4090 NW 84th CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
OCALA · FLORIDA

City & State
OCALA · FLORIDA

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

Zip
34482

Country
USA

Zip
34482

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LAPEER, RUSSELL W
LANDT, WIECHENS, LAPEER & AYERS
445 NE 8TH AVE
OCALA FL 34470**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
ROBERTS, RALPH L SR
7340 NW US HWY 27
OCALA FL 33482** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
ROBERTS, MARY D
7340 NW US HWY 27
OCALA FL 33482** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
ROBERTS, RALPH L II
600 GILLAM RD
WILMINGTON OH 45177** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
ROBERTS, ROBY L
600 GILLAM RD
WILMINGTON OH 45177** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
CARPENTER, MICHELLE R
600 GILLAM RD
WILMINGTON OH 45177** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PRES.
THOMAS C. CAVELLIER
600 GILLAM RD.
WILMINGTON, OH 45177** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V.P.
DANIEL J. HIRSCHY
4090 NW 84th CT.
OCALA, FLORIDA 34482** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SEC.
JEFFERY C. WADE
600 GILLAM RD
WILMINGTON, OH. 45177** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

12. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

1/20/03

Date

Daytime Phone #

CR2E034 (10/02)