1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

SIGNATURE:

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90075 015 ***150.00

UUALA 1	UAR SALES, INU.				39/0/8 - 9	0004 - 15
Principal Place of Business Mailing Address				<u></u>	I INDICADE SID INCOLUNC ARTIC MARIE	Atti Abiba ciisi Aina I tiini Attin aii+ inei
4835 SOUTH P	INE AVE.	P O BOX 6599				1
OCALA FL 344		OCALA FL 34478				
		US			DO NOT WRITE II	N THIS SPACE
			,		3. Date Incorporated or Qualified	
					05/03/1995	Applied For
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3320738	Not Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		27				<u> </u>
City & State	3	City & State			6. Election Campaign Financing	\$5.00 May Be Added to Fees
23		28		*	Trust Fund Contribution	
Zip	Country	Zip	Coun	itry	8. This corporation owes the current y	/ear
24		29 A Secieta and A sect	30		Intangible Personal Property. 10. Name and Address of New Regis	
	9. Name and Address of Cu	irrent Registered Agent		81 Name	10. Name and Address of New Hogi-	3.0104 / 1901.
Will	LIAMS, REUBEN \$ IV		- 1	1101110		
	E SILVER SPRINGS BLVD			82 Street Add	lress (P.O. Box Number is Not Acceptable)	
			L	20		
SUITE 101 OCALA FL 34471				83		
QO.	CALL STATE		Ī	84 City		FL 85 Zip Code
		·····			4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	· - ' 1
11. Pursuant	to the provisions of sections 607	.0502 and 607.1508, Florida Statu State of Florida, Such change was	ites, the abo s authorized	ve-named corporate by the corporate	oration submits this statement for the purpo- tion's board of directors. I hereby accept the	e appointment as registered
agent. I a	m familiar with, and accept the	obligations of, section 607.0505, F	lorida Statu	ites	• ,	
SIGNATURE						
	Signature, typed or printed name of registere			ed Agent signature red	quired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE OF AND DIRECTORS IN 12
12.	VP OFFICER:	S AND DIRECTORS	13. 1.1 TITL	<u> </u>	ADDITIONS/CHANGES TO OFFICE	
TITLE	• •	DELETE		i		Change Addition
NAME	WILLIAMS, R.S. III		1.2 NAM]
STREET ADDRESS	1520 SE 5TH ST			EET ADDRESS		2
CITY-ST-ZIP	OCALA FL 34470			Y-ST-ZIP		1
TITLE	PST	DELETE	2.1 TITI			Change Addition
NAME	MCMICHAEL, JOHN F		2.2 NA			1
STREET ADDRESS	4411 SE 15TH STREET,	-	2.3 STR	EET ADDRESS		
CITY-ST-ZIP	OCALA FL 34471			Y-ST-ZIP		
TITLE		DELETE	3.1 TITL	.E		Change Addition
NAME			3.2 NA	ME		l
STREET ADDRESS			3.3 STR	EET ADDRESS		
CITY-ST-ZIP			3.4 CIT	Y-ST-ZiP		
TITLE		DELETE	4.1 TITI	LE		Change Addition
NAME			4.2 NA	WE		1
STREET ADDRESS			4.3 STR	EET ADDRESS		
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP	•	
TITLE		DELETE	5.1 T/TI	LE		Change Addition
NAME	-		5.2 NA	ME		
STREET ADDRESS		•	5.3 STR	EET ADDRESS		j
CITY-ST-ZIP				Y-ST-ZiP		
TITLE		DELETE	6.1 TITI			Change Addition
NAME		☐ DETE 16	6.2 NA	\		
				REET ADDRESS		}
STREET ADDRESS			i 1			}
14. I hereby ce	artify that the information supplier	with this filing does not qualify for	the exemp	Y-ST-ZIP tion stated in se	ction 119.07(3)(i), Florida Statutes. I further	certify that the information
	, and are another or outpille					

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal affect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

597078-9004-15 P9500034756

To solve the bow background on the treat of transchoos and the many Sale. It solves that	1 4 2 0 0 0 0 2 4 2 6
OCALA CAR SALES, INC. D/B/A GOLF CAR WAREHOUSE	6250
	DATE Jul 27,99 8 63-4/630 FL 1003
of S. Dysala it of State	\$ 150.00 121/102 BOUNDS FROM
NetionsBank NetonsBank, N.A.	DOLLARS DELL
AGB BY 063000047 BOR # 1 95 000 3435	Juf Mill
#006250# #063000047# 00115213	-1-0000 /s0000-1-

