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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P95000090488 (4)

OCALA STORE, INC.

CITY-ST-ZIP

Principal Place of Business Mailing Address 1917 E SILVER SPRINGS BLVD 521 NORTHWEST 13TH STREET OCALA FL 34470 GAINESVILLE FL 32801 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified l 1/28/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3343926 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 \Box 28 Trust Fund Contribution Added to Fees Zip Country Zιρ Country 8. This corporation owes or has paid the current year Intangible 24 Yes Yes 25 30 ☐ No 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GORE, MICHAEL D. 521 NW 13TH ST 82 Street Address (P.O. Box Number is Not Acceptable) **GAINESVILLE FL 32601** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE Signature, typed or printed name of registered agent and tile if applicable. (NOTE: Bogistered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DCS TITLE DELETE 1.1 TIRE Change Addition GORE, ARTHUR J. NAME 1.2 NAME 521 NORTHWEST 13TH STREET STREET ADDRESS 13 STREET ADDRESS gainesville fl CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DILLETE 21 TITLE Change Addition NO R IN DAVID Shukovsky, davidř j NAME 2.2 NAME **521 NORTHWEST 13TH STREET** STREET ADDRESS 2.3 STREET ADDRESS GAINESVILLE FL 32601 CITY-SE-ZIP 2. 4 CITY - ST-ZIP TITLE DI LETE 3.1 TITLE Change Addition NAME FLEISCHMAN, ANDOR 3.2 NAME 521 NW 13TH ST STREET ADDRESS 3.3 STREET ADDRESS **GAINESVILLE FL** CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change Addition GORE, MICHAEL D. NAME 4. 2 NAME 521 NW 13TH ST STREET ADDRESS 4.3 STREET ADDRESS **GAINESVILLE FL** CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE Change 5.1 TITLE Addition LEWIS, RICHARD NAME 5.2 NAME STREET ADDRESS 521 NW 13TH ST 5.3 STREET ADDRESS **GAINESVILLE FL** CITY-ST-ZIP 5.4 CITY - ST - ZIP DIRECTOR-TITLE DELETE 6 1 TITLE Change **X** Addition NAME 6.2 NAME LAURA SHUKUVEKLY TWOY AUSTER MACKETIZIE OFLIVE STREET ADDRESS 6.3 STREET ADDRESS

Ig does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information upper is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an unity empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the logal difference. I hereby certify that the information s indicated on this annual report or su officer or director of the corporation. Block 12 or Block 13 if changed, c

FILED

Apr 03 1998 8:00am

Secretary of State