## 2003 FOR PROFIT CORPORATION

## UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 1. Entity Name

P95000096847

ANSLEY PROPERTIES, INC.



Principal Place of Business % CAMELOT CHATEAU

1831 SE LAKE WEIR AVENUE

OCALA FL 34471

City & State

C. A. HARRIS

**OCALA FL 34471** 

% CAMELOT CHATEAU 1831 SE LAKE WEIR AVENUE

Zip

Mailing Address P.O. BOX 3310

OCALA FL 34478

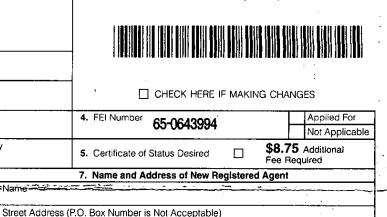
City & State

OVIGN 12 OTT		
2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt, #, etc.	

6. Name and Address of Current Registered Agent

FILED Apr 04, 2003 8:00 am Secretary of State

04-04-2003 90139 031 \*\*\*150.00



8.	The above named entity submits this statement for the purpose of changing its registere	ed office or registered agent, or both, in the State of Florida.	I am familiar with, and accept
	the obligations of registered agent.	•	4

City

Country

SIGNATURE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Country

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

(NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

Zip Code

Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change · ☐ Addition HARRIS, CHARLES A III /NAME NAME 1831 SE LAKE WEIR AVENUE STREET ADDRESS STREET ADDRESS **OCALA FL 34471** CITY-ST-ZIP CITY-ST-ZIP VSD TITLE ☐ Delete TITLE Change Addition HARRIS, CHARLES A NAME STREET ADDRESS 1831 SE LAKE WEIR AVENUE STREET ADDRESS CITY-ST-ZIP OCALA FL 34471 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change · TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE □ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change - Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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. Hurther 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 trusted 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 a

5 March 2003 (352)629-6078