

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000097389 (7)

1. Corporation Name

CHECKER CAB OF OCALA INC.



Principal Place of Business

Mailing Address

7200 SW 8TH AVENUE STE R 112  
GAINESVILLE FL 32607

7200 SW 8TH AVENUE STE R 112  
GAINESVILLE FL 32607

3. Date Incorporated or Qualified

3a. Date of Last Report

12/20/1995

2. Principal Place of Business

2a. Mailing Address

21 7200 SW 8th Ave

26 Same as above

4. FEI Number

59-3192693

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032  
Florida Statutes ☐ Yes ☐ No

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 R112

27 City & State

City & State

28 CC

23 Gainesville, Florida

29 City

Zip

Country

Zip

Country

24 32607

25 US

29 CC

30 US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BANKS, SIM H III  
7200 SW 8TH AVENUE STE R 112  
GAINESVILLE FL 32607

81 Name

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

83

84 City

FL

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 familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

*Sim H. Banks III*

(If 1015 Registered Agent Signature required when reinstating)

DATE

08-1-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
President  
Sim H. Banks III  
7200 SW 8th Ave R112  
Gainesville, FL 32607

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
~~Drane Archer Banks~~  
~~7200 SW 8th Ave R112~~  
~~Gainesville, FL 32607~~

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
Vice President, Secretary  
Drane Archer Banks  
7200 SW 8th Ave R112  
Gainesville, FL 32607

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

*Sim H. Banks III*

*Sim H. Banks III*

08-1-96

(352) 331-8777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Day

Display Phone

CR2E034 (3/96)