

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000019314**

1. Corporation Name

OCALA PROPERTIES, INC.

Principal Place of Business

**2320 N.E. SECOND STREET
SUITE 2A
OCALA FL 34470
US**

Mailing Address

**P. O. BOX 771206
OCALA FL 34477
US**

FILED
Jul 20, 1999 8:00 am
Secretary of State

07-20-1999 90018 016 ***550.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/01/1996

4. FEI Number

59-3366717

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 owes the current year
Intangible Personal Property. ☐ Yes ☐ No

2. Principal Place of Business
21 **3019 SW 27th Avenue**

2a. Mailing Address

26 **3019 SW 27th Avenue**

Suite, Apt. #, etc.

22 **Suite #202**

Suite, Apt. #, etc.

27 **Suite #202**

City & State

23 **Ocala, FL**

City & State

28 **Ocala, FL**

Zip

24 **34471**

Country

25 **USA**

Zip

29 **34471**

Country

30 **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**YOUNG, LARRY E
2932 S.W. 41ST PLACE
OCALA FL 34471**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.002 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 aware of the obligations of section 607.0505, Florida Statutes.

SIGNATURE **Larry E. Young**
typed or printed name of registered agent and title if applicable.

Larry E. Young
(NOTE: Registered Agent signature required when reinstating)

7-14-99
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE
NAME **YOUNG, LARRY E**
STREET ADDRESS **2932 S.W. 41ST PLACE**
CITY-ST-ZIP **OCALA FL 34471**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, trustee or liquidator of the corporation or the receiver, trustee or liquidator of the corporation; and that my name appears in Block 12 or Block 13 if changed, or on an attachment to this report.

SIGNATURE **Larry E. Young**
typed or printed name of officer or director

7-14-99
Date

352-861-2218
Daytime Phone #

CR2E034 (5/99)