

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Jun 15 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000037620 (7)

1. Corporation Name

GOLDEN OCALA PROPERTIES, INC.

Principal Place of Business

7300 U.S. HIGHWAY 27  
OCALA FL 34482

Mailing Address

7300 U.S. HIGHWAY 27  
OCALA FL 34482

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/30/1996

4. FEI Number

59-3514307

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 or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81

Name

Arnold Sadighi

82

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

7340 NW U.S. Hwy. 27

83

84

City

Ocala

FL

85

Zip Code

34482

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/4/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

PD  
NAME FECKER, ALLAN  
STREET ADDRESS 7300 U.S. HIGHWAY 27  
CITY-ST-ZIP OCALA FL 34482

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

V/S  
1.2 NAME Maryann Moore  
1.3 STREET ADDRESS 7300 U.S. Highway 27  
1.4 CITY-ST-ZIP Ocala, FL 34482

2.1 TITLE ☐ Change ☒ Addition

T  
2.2 NAME Allan Feker  
2.3 STREET ADDRESS 7300 U.S. Highway 27  
2.4 CITY-ST-ZIP Ocala, FL 34482

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

1000025610  
-06/16/98--01070--034  
\*\*\*150.00

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 or trustee empowered 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.

SIGNATURE

CR2E034 (10/97)