## 1-28-97 13-0904 C-FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P96000056474 (5)

## **FILED** Jan 28 1998 8:00am Secretary of State

ONB FINANCIAL SERVICES, INC.						
						É TRAFILBRY JAR KATITA ATTIL ARTIL RATIL BRITA BRITA BUTA ATTIL ALTIL ALATI ATTIL TRAFIL ATTIL TRAFI
			····			
Principal Place of Business Mailing Address						r 184 1881 110 10116 OTTH BRITE BRITE BRITE BLIEF BIRTE STORT SERV SES. 1681
112 N. MAGNOLIA 112 N. MAGNOLIA						
OCALA FL 34475 OCALA FL 34475						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						07/01/1996
<del>_</del>	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21	11	26				<b>59-3413525</b> Not Applicable
Suite, Apt.	#, OIC.	Suite, Apt. #, etc.				5. Certificate of Status Desired Security Securi
City & State	9	City & State				
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country		Zip Country		<del></del>	8. This corporation owes or has paid the current year Intangible	
24	25	29	30			Personal Property Tax due June 30. Yes No
	g. Name and Address of Current	t Registered Agent				10. Name and Address of New Registered Agent
KA'	y Jr, don			81	Name	θ
112 N MAGNOLIA			ł	82	Street A	et Address (P.O. Box Number is Not Acceptable)
00	ALA FL 34475					
				63		
			Ì	84	City	85 Zip Code
44 Purcuant	o the provisions of Sections 607 0503	and 607 1508. Florida Statuta	c the at		namad i	FL 83 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 reoffice 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 regagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						prporation's board of directors. I hereby accept the appointment as registered
•	m tamiliar with, and accept the obliga	tions of, Section 607.0505, Fig	noa Stati	utes.		
SIGNATURE	Signature, typed or printed name of registered agen	of and little if applicable (NOTE	Registered	Agent	l elulangia	uto required when reinstating) DATE
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 ТЛ	LE		Change X Addition
NAME	KAY, DON JR.		1.2 NA	1.2 NAME		KYLE A. KAY
STREET ADDRESS	112 N. MAGNOLIA		1.3 STREET AL		DDRESS	112 N. MAGNOLIA
CITY-ST-ZIP	OCALA FL 34475	T prieze				OCALA, FL 34475
TITLE	DISCOUL HADOLD	☐ DELETE	2.1 TIT		ľ	Range Addition
NAME	RUSSELL, HAROLD L 112 N. MAGNOLIA			2.2 NAME		RANCE H. KAY
STREET ADDRESS	OCALA FL 34475			2.3 STREET ADDRESS 112 2.4 CITY-ST-ZIP OCA		
CITY-ST-ZIP TITLE	n	DELETE	3.1 TITLE		- ZIP	Change Addition
NAME	<b>B</b> ERRYHILL, MICHAEL W	head or water at	3.2 NAME			TAGUINI
STREET ADDRESS	112 N. MAGNOLIA				DDRESS	
CITY-ST-ZIP	OCALA FL 34475 34.		3.4. C0		1	
TITLE	D	DELETE	4.1 TIT			Change Addition
NAME	Cullison, Jerry B		4. 2 NA	ME		
STREET ADDRESS	112 N. MAGNOLIA		4.3 STREET ADDRESS		ODRESS	f -
CITY-ST-ZIP	OCALA FL 34475		4.4 CIT	Y-\$1-	ZIP	
TITLE	D	☐ DELETE	5.1 TIT	LE		☐ Change ☐ Addition
NAME	ANDREWS, DENNIS E		5.2 NA			
STREET ADDRESS	1 1 1 1		5.3 ST6	REET AL	DDRESS	·
CITY-ST-ZIP	OCALA FL 34475	Deserte	5.4 CIT		ZIP	
TITLE		DELETE	6.1 717			Change Addition
NAME			6.2 NAI		000500	
STREET ADDRESS					DDRESS	·
CITY-ST-ZIP			6.4 CIT	Y-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 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 over an attachment with an address.

JANUARY 21 1000 352-368-6800