Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90074 044 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000056474

 Corporation 	n Name	7000 17 1			
ONB FIN	IANCIAL SERVICES, INC.	•			
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Principal Place	e of Business	Mailing Address		1 SEALISM IND IDEAD BANK DEAL DOWN DEAL DEAL DEAL DEAL DEAL DEAL DEAL DEAL	TE BESTER BEITET BEITET TROOT AND LAND
112 N. MAGNOLIA 112 N. MAGNOLIA					
OCALA FL 34475 OCALA FL 34475				DO MONTHE IN THE OPACE	
				DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualifed	
			···	07/01/1996	
	ace of Business	2a. Mailing Address		4. FE! Number	Applied For
21	0 1	26 Suite Apt # etc		59-3413525	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State		27 City & State	· · · · · · · · · · · · · · · · · · ·		
City & State	e	<u> </u>		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	28	Country		
	25	_ 	30	8. This corporation owes the current year In Personal Property Tax.	ntangible □Yes □No
24	9. Name and Address of Curre		30	10. Name and Address of New Registered	
	5. Italiie una Addiese et Canto	III vedioreion valani	81 Name	IN THEIR GIVE CHARLES TO THE	
KAY	JR, DON				
	n magnolia		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
OCALA FL 34475		83			
			84 City	F	85 Zip Code
11 Durellant I	to the provisions of Sections 607.050	22 and 607 1508 Florida Statute	s the above-named corr	poration submits this statement for the purpose of	f changing its registered
office or re	egistered agent, or both, in the State	of Florida. Such change was au	thorized by the corporati	on's board of directors. I hereby accept the appo	ointment as registered
agent. I ar	m familiar with, and accept the obliga	ations of, Section 607.0505, Flori	ida Statutes.		
SIGNATURE	Standard by printed name of registered and	ent and title if anniinable (NOTE	Registered Agent signature require	ed when reinstating) DATE	
	Signature, typed or printed name of registered age	ent and title if applicable (NOTE. ND DIRECTORS	Registered Agent signature require	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
· · · · · · · · · · · · · · · · · · ·					ND DIRECTORS IN 12
12.	OFFICERS AN	ND DIRECTORS	13.		
12. TITLE NAME	OFFICERS AN	ND DIRECTORS	13. 1.1 TITLE		
12. TITLE NAME STREET ADDRESS	OFFICERS AND D KAY, KYLE A 112 N. MAGNOLIA	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		
12. TITLE NAME	OFFICERS AND D KAY, KYLE A	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DESCRIPTION OF STREET OF ST	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND D KAY, KYLE A 112 N. MAGNOLIA OCALA FL 34475 D KAY, RANCE H	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		☐ Change ☐ Addition
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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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CER OR DIRECTOR

ONB FINANCIAL SERVICES, INC.

112 N. MAGNOLIA AVENUE
P.O. BOX 4050
OCALA, FLORIDA 34478-4050
PHONE (352) 368-6800
FAX (352) 368-7818

January 14, 1999

Please add names in block 12.

Title:

C/P/D

Name:

Don Kay, Jr.

Address:

112 N. Magnolia

Ocala, FL 34475

Title:

D

Name:

Harold L. Russell

Address:

112 N. Magnolia

Ocala, FL 34475

Title:

D

Name:

J. E. Stephens, Jr.

Address:

112 N. Magnolia

Ocala, FL 34475