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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 27 1998 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT

| | C/OCALA CORP. | 0010072 (4) | | | |
|---|---|---|---|--|--|
| Principal Plac | ce of Business | Mailing Address | | T INDICIONAL LIGITARIA INDICENTIA MALIA MALIA MALIA MALIA MALIA MALIA MALIA INDICENTAL LIGITA MALIA MA | |
| 2801 SOUTH | WEST COLLEGE ROAD | 2801 SOUTHWEST COL | LEGE ROAD | | |
| SUITE 1 OCALA FL 34474 | | Suite 1 Ocala FL 34474 | | DO NOT WRITE IN THIS SPACE | |
| | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified | |
| | | | | 02/20/1997 | |
| 2. Principal F | Place of Business | 2a. Mailing Address | | 4. FEI Number Applied For | |
| 21 | | 26 | | 59-3437305 Not Applicable | |
| Suite, Apt | . #, etc. | Suite, Apt. #, etc. | | SR 75 Additionet | |
| 22 | | 27 | | 5. Certificate of Status Desired Fee Required | |
| City & Sta | te | City & State | | 6. Election Campaign Financing \$5.00 May Be | |
| 23 | | 28 | | Trust Fund Contribution Added to Fees | |
| Zip | Country | Zip | Country | 8. This corporation owes or has paid the current year Intangible | |
| 24 | 25 9. Name and Address of Curren | 29 | 30 | Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent | |
| ~ | · | | 81 Name | | |
| | DRPORATION SERVICE COMPAN | ır | | AUID L. MACKAY | |
| | 01 Hays Street Llahassee FL 32301-2525 | | 62 Street Add | ress (P.O. Box Number is Not Acceptable) | |
| ı n | ELAMASSEE FL 32301-2323 | | 83 0 0 4 | 1 C 2 C 11 D 1 C 1 A | |
| | | | <u>~ 280</u> | | |
| | | | 84 City | CALA FL 85 34474 | |
| 11. Pursuant office or agent. I a | to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligi | 2 and 607.1508, Florida Statu of Florida. Such change was 4(0).901, Section 807.0505, F | ites, the above-named corp authorized by the corpora lorida Statutes. | poration submits this statement for the purpose of changing its registered ition's board of directors. I hereby accept the appointment as registered | |
| SIGNATURE | Moreta | Mach | | 1/14/98 | |
| SIGNATURE | Signature typed or printed name of registered age | not and title if applicable (NO | TE: Registered Agent signature requ | ored when reinstating) DATE | |
| 12. | Signatur typed or printed name of registered ago OFFICERS ANI | nhi and title if applicable (NO | PTE: Registered Agent signature requ | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| 12. | Signatur typed or printed name of registered age OFFICERS ANI V. P. DIRECTOR | D DIRECTORS TREAS. DELETE | PTE: Registered Agent signature required 13. | ored when reinstating) DATE | |
| 12. TITLE NAME | Signature types or priviled name of registered sign OFFICERS ANI V. P. DIRECTOR George L. MACKA | D DIRECTORS TO FAS. DELETE | 13. 1.1 ITLE 1.2 NAME | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| 12. TITLE NAME STREET ADDRESS | Signature types or privide name of registered sign OFFICERS ANI V. P. DIRECTOR George L. MACKAS SDI Pawnee Trail | ini and title if applicable (NO D DIRECTORS DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP | Signature types or privide name of repostered agn OFFICERS AN V. P. DIRECTOR George L. MACKAG SDI PAWNEE Trail MAITLAND, FL 32 | int and title if applicable (NO D DIRECTORS DELETE | 13. 1.1 If LE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST-ZIP | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature typod or privated name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAG SDI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY | INDICATE TO THE TELEPOOL OF T | 13. 1.1 IffLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - 2IP 2.1 TITLE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME | Signature typod or privated name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAG SDI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY | INDICATE TO THE TELEPOOL OF T | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition | |
| 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS | Signature types or printed name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | D DIRECTORS TREAS. DELETE DELETE DELETE DELETE DELETE DELETE | 13. 1.1 I/TLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition | |
| 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME | Signature typod or privated name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAG SDI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY | D DIRECTORS TREAS. DELETE DELETE DELETE DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition | |
| 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP | Signature types or printed name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | TREAS. DELETE DELETE DELETE DELETE DELETE DELETE DELETE | 13. 1.1 ITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature types or printed name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | TREAS. DELETE DELETE DELETE DELETE DELETE DELETE DELETE | 13. 1.1 ITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature types or private name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | D DIRECTORS TREAS. DELETE DELETE DELETE DELETE DELETE DELETE DELETE | 13. 1.1 ITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | Signature types or private name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | TREAS. DELETE DELETE DELETE DELETE DELETE DELETE DELETE | 13. 1.1 ITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP | Signature types or private name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | D DIRECTORS TREAS. DELETE DELETE DELETE DELETE DELETE DELETE DELETE | 13. 1.1 ITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature types or private name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | D DIRECTORS TREAS. DELETE DELETE DELETE DELETE DELETE DELETE DELETE | 13. 1.1 ITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature types or private name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | D DIRECTORS TREAS. DELETE DELETE Surte I DELETE DELETE | 13. 1.1 ITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | Signature types or private name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | D DIRECTORS TREAS. DELETE DELETE DELETE DELETE DELETE DELETE DELETE | 13. 1.1 ITTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature types or private name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | D DIRECTORS TREAS. DELETE DELETE Surte I DELETE DELETE | 13. 1.1 Iffle 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature types or private name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | D DIRECTORS TREAS. DELETE DELETE Surte I DELETE DELETE | 13. 1.1 Iffle 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature types or private name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | D DIRECTORS TREAS. DELETE DELETE DELETE DELETE DELETE DELETE | 13. 1.1 Iffle 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.5 TITLE 5.5 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature types or private name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | D DIRECTORS TREAS. DELETE DELETE Surte I DELETE DELETE | 13. 1.1 Iffle 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature types or private name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | D DIRECTORS TREAS. DELETE DELETE DELETE DELETE DELETE DELETE | 13. 1.1 Iffle 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition | |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature types or private name of repostered age OFFICERS ANI V. P. DIRECTOR George L. MACKAN SOI PAWNEE Trail MAITLAND, FL 32 V. P. SECRETARY DAVID L. MACKAN 2801 SW College R | D DIRECTORS TREAS. DELETE DELETE DELETE DELETE DELETE DELETE | 13. 1.1 Iffle 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition | |

Indicated on this annual report or supplied with this numb does not quality for the exemption stated in Section 119.07(3)(f). Florida Statutes. I further certify that the informatic indicated on this annual report or suppliemental 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 of 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.