2004 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 26, 2004 08:00 AM Secretary of State DOCUMENT # P98000102244 UNIVERSAL DEVELOPMENT OF OCALA, INC. Principal Place of Business Mailing Address 7 EAST SILVER SPRINGS BLVD. #208 7 EAST SILVER SPRINGS BLVD. #208 OCALA, FL 34470 OCALA, FL 34470 01212004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3627868 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent MCCOY, GEORGE R DO NOT WRITE 7 EAST SILVER SPRINGS BLVD, #208 OCALA, FL 34470 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9, Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 U000000067222 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE MCCOY, GEORGE R NAMÉ STREET ADDRESS 7 EAST SILVER SPRINGS BLVD. #208 CITY-ST-ZIP OCALA, FL 34470 NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CHY-ST-ZIP IN THIS SPACE TITLE NAME STREET ACCRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attackment with an address, with all other like empowered.

SIGNATURE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED