

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 25, 2002 8:00 am**  
**Secretary of State**

06-25-2002 90452 025 \*\*\*150.00


**DOCUMENT # P99000074415**  
 1. Entity Name  
**OCALA INVESTMENTS COMPANY**

Principal Place of Business      Mailing Address  
**230 NORTHEAST 25TH AVENUE**      **230 NORTHEAST 25TH AVENUE**  
**OCALA FL 34470**      **OCALA FL 34470**

2. Principal Place of Business      3. Mailing Address  
**2800 E SILVER SPRINGS BLVD**      **2800 E SILVER SPRINGS BLVD**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
**SUITE 205**      **SUITE 205**  
 City & State      City & State  
**OCALA FL**      **OCALA FL**

Zip      Country      Zip      Country  
**34470**      **USA**      **34470**      **USA**

80125726



DO NOT WRITE IN THIS SPACE

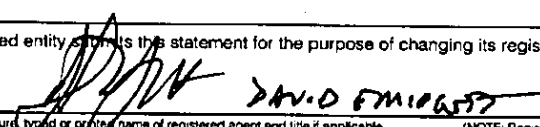
4. FEI Number      Applied For  
**59-3594323**      Not Applicable

5. Certificate of Status Desired       \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**MIDGETT, DAVID E**  
**230 NORTHEAST 25TH AVENUE**  
**OCALA FL 34470**

7. Name and Address of New Registered Agent  
 Name      **M. MIDGETT, DAVID E**  
 Street Address (P.O. Box Number is Not Acceptable)  
**2800 E SILVER SPRINGS BLVD**  
**SUITE 205**  
 City      **OCALA**      FL      Zip Code      **34470**

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.

SIGNATURE  **DAVID E MIDGETT**      **APRIL 22, 2002**  
Signature (typed or printed name of registered agent and title if applicable). (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)     

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.       \$5.00 May Be Added to Fees

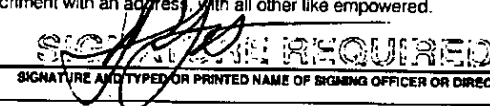
11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	MIDGETT, DAVID E	230 NE 25TH AVE	OCALA FL 34470	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **REQUIRED**      **APRIL 22, 2002 352-344-8223**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (9/01)