## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

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## DOCUMENT # S21687

1. Entity Name

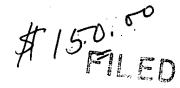
OCALA AIRPORT COMMERCE CENTER, INC.



Principal Place of Business

11635 NW 1ST AVE. GAINEVILLE, FL 32607 Mailing Address

11635 NW 1ST AVE. GAINEVILLE, FL 32607



04 APR - 1 AM 11:11

SECRETARY OF STATE TALLAHASSEE, FLORIDA



01212004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3034862 . Applied For ...
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CURTIS, JOHN M. 11635 NW 1ST AVE. GAINESVILLE, FL 32607

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	named entity submits this statement for the pions of registered agent.	ourpose of changing its regis	tered office or registered agent, or both	, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Regis	tered Agent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Fin Trust Fund Contribution		
10. OFFICERS AND DIRECTORS		*		
NAME STREET ADDRESS	VD HODOR, HOWARD 2700 NW 43RD ST.	,	30 04/28	00034387173 /0401020030 **150.00

TITLE PTD NAME CURTIS, JOHN M. STREET ADDRESS 11635 NW 1ST AVE. GAINESVILLE, FL CITY-ST-ZIP TITLE S CURTIS, GAIL W. NAME STREET ADDRESS 11635 NW 1ST AVE. CITY-ST-ZIP GAINESVILLE, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

John M. Curtis

President

01/23/04

352-332-0838

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPEO OR PRIMED NAME OF SIGNING OFFICER OR DIRECTO

Date