

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001211

Entity Name: OCALA WINNELSON CO.

FILED  
Apr 10, 2009  
Secretary of State

## Current Principal Place of Business:

3661 SOUTH PINE AVE  
OCALA, FL 344716610

## New Principal Place of Business:

## Current Mailing Address:

3661 SOUTH PINE AVE  
OCALA, FL 344716610

## New Mailing Address:

FEI Number: 26-2133725

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CP ( ) Delete  
Name: JOHNSON, DON  
Address: 3661 SOUTH PINE AVE  
City-St-Zip: OCALA, FL 344716610

Title: D ( ) Delete  
Name: LARKIN, DENNIS M  
Address: 1000 HURRICANE SHOALS ROAD NE BLDG D 500  
City-St-Zip: LAWRENCEVILLE, GA 300434826

Title: DVP ( ) Delete  
Name: GROUT, CALVIN W  
Address: 3110 KETTERING BLVD  
City-St-Zip: DAYTON, OH 454396610

Title: ST ( ) Delete  
Name: MUEGEL, PHILIP E  
Address: 1000 HURRICANE SHOALS RD NE BLDG D 500  
City-St-Zip: LAWRENCEVILLE, GA 344434826

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DVP (X) Change ( ) Addition  
Name: BOHANNON, RON  
Address: 3110 KETTERING BLVD  
City-St-Zip: DAYTON, OH 454396610

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANITA L. LEFTY

AGT

04/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date