


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 08:00 AM
Secretary of State

DOCUMENT # J39264
 1. Entity Name
 OCALA INNS, INC.



Principal Place of Business: 613-B BEACHVIEW DR, ST SIMONS ISLANDS, GA 31522 US
 Mailing Address: PO BOX 20287, ST SIMONS ISLAND, GA 31522 US



04242006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2744211 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
 ZELL, ROYALD A.
 2225 CLIMBING IVY DRIVE
 TAMPA, FL 33618

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE	VD
NAME	ZELL, ROYALD A.
STREET ADDRESS	2225 CLIMBING IVY DRIVE
CITY-ST-ZIP	TAMPA, FL 33618
TITLE	TD
NAME	ZELL, DALE L.
STREET ADDRESS	2225 CLIMBING IVY DRIVE
CITY-ST-ZIP	TAMPA, FL 33618
TITLE	DP
NAME	ZELL, HAROLD E.
STREET ADDRESS	101 WORTHING RD
CITY-ST-ZIP	ST SIMONS ISLAND, GA
TITLE	SD
NAME	ZELL, LUCY D.
STREET ADDRESS	101 WORTHING RD
CITY-ST-ZIP	ST SIMONS ISLAND, GA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000540318
 05/10/06-80011-012 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Harold E. Zell HAROLD E. ZELL 4/24/06 912 996 0338