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May 14 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortherm  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N00038 (2)  
1. Corporation Name  
OCALA CHAPTER 812, E.A.A., INC.



Principal Place of Business 8 ASH TRAIL OCALA FL 34472 US	Mailing Address RT. 3, BOX 923 GAINESVILLE FL 32653 US	3. Date Incorporated or Qualified 11/29/1983	4. FEI Number 59-3363746	Applied For <input type="checkbox"/> Not Applicable
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21. Principal Place of Business 5551 S.E. 33 AVE	22. Suite, Apt. #, etc.	23. City & State OCALA, FL	24. Zip 34480	25. Country US	26. Mailing Address 5551 SE 33 AVE	27. Suite, Apt. #, etc.	28. City & State OCALA, FL	29. Zip 34480	30. Country US	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent ROUX JOSEPH 9101 NW 71ST TERRACE RT. 3, BOX 923 GAINESVILLE FL 32653				10. Name and Address of New Registered Agent 81 Name SCOTT H. EKBERG 82 Street Address (P.O. Box Number is Not Acceptable) 5551 S.E. 33 AVE 83 84 City OCALA FL 85 Zip Code 34480			
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Scott H. Ekberg SCOTT H. EKBERG TREASURER 01/29/98  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	HINES WILLIAM 301 OAK TRACK TR OCALA FL	<input type="checkbox"/> DELETE	1.1 TITLE D HINES WILLIAM 1.2 NAME 5018 FAIRWAYS LN 1.3 STREET ADDRESS OCALA, FL 34472 1.4 CITY-ST-ZIP
TITLE D	NICHOLS, CARMAN P.O. BOX 536 N/A OCALA FL	<input type="checkbox"/> DELETE	2.1 TITLE D NICHOLS, CARMAN 2.2 NAME P.O. BOX 536 N/A 2.3 STREET ADDRESS OCALA, FL 2.4 CITY-ST-ZIP
TITLE TD	ROUX JOSEPH E. 9101 NW 71ST TER., RT.3, BOX 923 GAINESVILLE FL	<input checked="" type="checkbox"/> DELETE	3.1 TITLE TD SCOTT H. EKBERG 3.2 NAME 5551 S.E. 33 AVE 3.3 STREET ADDRESS OCALA, FL 34480 3.4 CITY-ST-ZIP
TITLE PD	WILSON, DONNA 8 ASH TRAIL OCALA FL	<input checked="" type="checkbox"/> DELETE	4.1 TITLE PD MIGUEL TORRES 4.2 NAME 15371 SE 25th Terr. 4.3 STREET ADDRESS Summerfield, FL 34491 4.4 CITY-ST-ZIP
TITLE VD	CRADDICK, DAVE 6225 SE 158TH CT. OCKLAWAHA FL	<input checked="" type="checkbox"/> DELETE	5.1 TITLE VD DAVID TATJE 5.2 NAME 213 EASTRIDGE DR. 5.3 STREET ADDRESS EUSTIS, FL 32726 5.4 CITY-ST-ZIP
TITLE SD	BOYKIN CHERYL 3400 NE 45TH ST. OCALA FL	<input checked="" type="checkbox"/> DELETE	6.1 TITLE SD FREDRICK WEAVER 6.2 NAME 8780 S.E. 76th Terrace 6.3 STREET ADDRESS Ocala, FL 34472 6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Scott H. Ekberg SCOTT H. EKBERG 04/16/98 352-687-5134

CFR2037 (1097)