FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DOCUMENT # G58457 (4)

1. Corporation Name
BONNIE REALTY, INC.

Principal Place of Business: 3607 EAST FOREST DRIVE, INVERNESS FL 32650

Mailing Address: 3607 EAST FOREST DRIVE, INVERNESS FL 32650

APPROVED
9:37

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	09/08/1983
3a. Date of Last Report	04/26/1994
4. FEI Number	59-2319896 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation is eligible for ... Florida Statutes	☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 5353 SW STATE RD 200	26 5353 SW STATE RD 200
Suite, Apt. # etc. 22	Suite, Apt. # etc. 27
City & State 23 OCALA, FL.	City & State 28 OCALA, FL.
Zip 24 34474 Country 25	Zip 29 34474 Country 30

9. Name and Address of Current Registered Agent

LA FOND, PAUL
3607 FOREST DR
INVERNESS FL 32650

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 5353 SW STATE ROAD 200
83
84 City: OCALA FL 85 Zip Code: 34474

11. Pursuant to the provisions of Sections 607.0502 and 617.0502, 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 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	PSD	TITLE	☒ Change ☐ Addition
NAME	LA FOND, PAUL	NAME	
STREET ADDRESS	3607 E FOREST DR	STREET ADDRESS	5353 SW STATE ROAD 200
CITY-ST-ZIP	INVERNESS, FL 00000	CITY-ST-ZIP	OCALA, FL. 34474
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing is accurate ... Florida Statutes ... and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Paul La Fond — April 30/1995 — 904-237-7637
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0352591 CP