FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 MAY -1 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

DOCUMENT # 588464 (8)

1. Corporation Name

BONO EQUITY CORPORATION

Principal Place of Business
~~3300 PHILLIPS HIGHWAY~~
~~BOX 5069~~
~~JACKSONVILLE FL 32207~~

Mailing Address
~~3300 PHILLIPS HIGHWAY~~
~~BOX 5069~~
~~JACKSONVILLE FL 32207~~

3. Date Incorporated or Qualified: 10/04/1978
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21 4733 Secret Harbor Dr.N.
Suite, Apt. #, etc.
22
City & State
23 Jacksonville, Florida
Zip 24 32257
Country 25 USA

2a. Mailing Address
26 4733 Secret Harbor Dr.N.
Suite, Apt. #, etc.
27
City & State
28 Jacksonville, Florida
Zip 29 32257
Country 30 USA

4. FEI Number: 59-1982185 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

~~MCGEHEE, THOMAS R.~~
~~3300 PHILLIPS HWY~~
~~JACKSONVILLE, FL LP 32207~~

10. Name and Address of New Registered Agent

81 Name: Jonathan Y. Rogers
82 Street Address (P.O. Box Number is Not Acceptable): 4733 Secret Harbor Dr. N.
83 Jacksonville, FL 32257
84 City FL
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Jonathan Y. Rogers 4/28/95
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	~~AST~~	1 1 TITLE	PD ☒ Change ☐ Addition
NAME	~~DUPREE, J W JR~~	1 2 NAME	Jonathan Y. Rogers
STREET ADDRESS	~~3300 PHILLIPS HWY~~	1 3 STREET ADDRESS	4733 Secret Harbor Dr. N.
CITY - ST - ZIP	~~JACKSONVILLE, FL 0~~	1 4 CITY - ST - ZIP	Jacksonville, FL 32257
TITLE	~~VAS~~	2 1 TITLE	☒ Change ☐ Addition
NAME	~~PATTERSON, R A~~	2 2 NAME	
STREET ADDRESS	~~3300 PHILLIPS HWY~~	2 3 STREET ADDRESS	
CITY - ST - ZIP	~~JACKSONVILLE, FL 0~~	2 4 CITY - ST - ZIP	
TITLE	~~S~~	3 1 TITLE	☒ Change ☐ Addition
NAME	~~MCGEHEE, T R JR~~	3 2 NAME	
STREET ADDRESS	~~3300 PHILLIPS HWY~~	3 3 STREET ADDRESS	
CITY - ST - ZIP	~~JACKSONVILLE, FL 0~~	3 4 CITY - ST - ZIP	
TITLE	~~DV~~	4 1 TITLE	☒ Change ☐ Addition
NAME	~~MCGEHEE, F S~~	4 2 NAME	
STREET ADDRESS	~~3300 PHILLIPS HWY~~	4 3 STREET ADDRESS	
CITY - ST - ZIP	~~JACKSONVILLE, FL 0~~	4 4 CITY - ST - ZIP	
TITLE	~~V~~	5 1 TITLE	☒ Change ☐ Addition
NAME	~~MCGEHEE, F S JR~~	5 2 NAME	
STREET ADDRESS	~~3300 PHILLIPS HWY~~	5 3 STREET ADDRESS	
CITY - ST - ZIP	~~JACKSONVILLE, FL 0~~	5 4 CITY - ST - ZIP	
TITLE	~~CPD~~	6 1 TITLE	☒ Change ☐ Addition
NAME	~~MCGEHEE, T R~~	6 2 NAME	
STREET ADDRESS	~~3300 PHILLIPS HWY~~	6 3 STREET ADDRESS	
CITY - ST - ZIP	~~JACKSONVILLE, FL 0~~	6 4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jonathan Y. Rogers 4/28/95 (904) 348-3334
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #