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 9:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F94000001063 (6)**

1. Corporation Name
AMERICA FIRST REIT, INC.

Principal Place of Business	Mailing Address
1004 FARNAM ST OMAHA NE 68102	1004 FARNAM ST OMAHA NE 68102

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **03/03/1994**
3a. Date of Last Report:

2. Principal Place of Business (21) / 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) / Suite, Apt. #, etc. (27)
City & State (23) / City & State (28)
Zip (24) Country (25) / Zip (29) Country (30)

4. FEI Number: **47-0764417** ☐ 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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CP	1.1 TITLE	C/CEO/D	☒ Change ☐ Addition
NAME	YANNEY, MICHAEL B	1.2 NAME		
STREET ADDRESS	1004 FARNAM ST	1.3 STREET ADDRESS		
CITY-ST-ZIP	OMAHA NE	1.4 CITY-ST-ZIP		
TITLE	V	2.1 TITLE	P/COO	☒ Change ☐ Addition
NAME	ZIMMERMAN, STEWART	2.2 NAME		
STREET ADDRESS	399 PARK AVE, 19TH FLOOR	2.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY	2.4 CITY-ST-ZIP		
TITLE	V	3.1 TITLE		☐ Change ☐ Addition
NAME	GREGO, JOSEPH N	3.2 NAME		
STREET ADDRESS	399 PARK AVE, 19TH FLOOR	3.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY	3.4 CITY-ST-ZIP		
TITLE	VST	4.1 TITLE		☐ Change ☐ Addition
NAME	THESING, MICHAEL	4.2 NAME		
STREET ADDRESS	1004 FARNAM ST	4.3 STREET ADDRESS		
CITY-ST-ZIP	OMAHA NE	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	ERWIN, GREGORY delete	5.2 NAME		
STREET ADDRESS	1650 FARNAM ST	5.3 STREET ADDRESS		
CITY-ST-ZIP	OMAHA NE	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	ABBOTT, PAUL L delete	6.2 NAME		
STREET ADDRESS	380 GREENWICH ST. 28TH FLOOR	6.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY	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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or added in connection with an address.

SIGNATURE: Michael Thesing (402) 444-1630
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number #
MICHAEL THESING

0478113 FP