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 AM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J93415** **(4)**

1. Corporation Name
STONERIDGE PROPERTIES OF FLORIDA, INC.

Principal Place of Business
222 SOUTH 15TH STREE
SUITE 600 NORTH
OMAHA NE 68102
US

Mailing Address
222 SOUTH 15TH STREET
SUITE 600 NORTH
OMAHA NE 68102
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/22/1987
3a. Date of Last Report: 05/20/1994

2. Principal Place of Business
21
Suite Apt # etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite Apt # etc
27
City & State
28
Zip 29 Country 30

4. FEI Number: 38-2766568 — 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. Has corporation been liable 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 ROAD
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 Section 607.0502 and 607.1608, 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

12. OFFICERS AND DIRECTORS

Title	CEO
Name	COON, KENNETH C.
Street Address	1222 S. 15TH ST., STE 600 N.
City, State, Zip	OMAHA NE
Title	TD
Name	MACE, GEORGIA M.
Street Address	222 S. 15TH ST., STE 600 N
City, State, Zip	OMAHA NE
Title	SD
Name	KNOLLA, PETER A.
Street Address	222 SOUTH 15TH ST., STE 600 N.
City, State, Zip	OMAHA FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Addition
Title
Name
Street Address
City, State, Zip

☐ Change ☐ Addition
Title
Name
Street Address
City, State, Zip

☐ Change ☐ Addition
Title
Name
Street Address
City, State, Zip

☐ Change ☐ Addition
Title
Name
Street Address
City, State, Zip

☐ Change ☐ Addition
Title
Name
Street Address
City, State, Zip

☐ Change ☐ Addition
Title
Name
Street Address
City, State, Zip

14. I hereby certify that the information supplied with this report 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 contained on the annual report or supplemental annual report is true and complete and that my signature shall have the same legal effect as made under oath. That I am an officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or is an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 04/29/95

Daytime Phone #: (402) 344-8800

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