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 MAR -7 AM 5:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000012184 (5)**

1. Corporate Name
SOFORENKO BEE HOMES, INC.

Principal Place of Business
~~4215 SOUTHPOINT BLVD.~~
~~SUITE 100~~
~~JACKSONVILLE FL 32216~~

Mailing Address
4215 SOUTHPOINT BLVD.
SUITE 100
JACKSONVILLE FL 32216

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/14/1994
3a. Date of Last Report: N/A

2. Principal Place of Business
21 8177 Old Kings Rd S. #4
22 Suite, Apt. # etc.
23 City & State: Jacksonville, FL
24 Zip: 32217 25 Country

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

4. FEI Number: 59-3225825 — 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 XX Yes ☐ No

9. Name and Address of Current Registered Agent
ANSBACHER, LEWIS
4215 SOUTHPOINT BLVD.
100 NATIONAL FINANCIAL BLDG.
JACKSONVILLE FL 32216

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 607.0505, 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. The character and amount of its outstanding and issued capital stock, the officers and directors and the appointed or designated agent, have consented to the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	D/P
NAME	SOFORENKO, MEYER O
ADDRESS	8177 OLD KINGS RD. S., #4
CITY, ST, ZIP	JACKSONVILLE FL 32217
TITLE	~~D/V~~
NAME	~~SOFORENKO, BETTY B~~
ADDRESS	~~8177 OLD KINGS RD. S., #4~~
CITY, ST, ZIP	~~JACKSONVILLE FL 32217~~
TITLE	V
NAME	Sheffield, Tom
ADDRESS	8177 Old Kings Rd.S., #4
CITY, ST, ZIP	Jacksonville, FL
TITLE	T
NAME	Peyronel, Renee Soforenko
ADDRESS	8177 Old Kings Rd.S., #4
CITY, ST, ZIP	Jacksonville, FL
TITLE	S
NAME	Sheffield, Susan
ADDRESS	8177 Old Kings Rd.S., #4
CITY, ST, ZIP	Jacksonville, FL

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 19

☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a director or officer 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 above, or on an attached amendment, or on a separate listing with my address.

SIGNATURE: M.O. Soforenko — 3/28/95 — 904-737-0030

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

001M74 CP