SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
95 JUL 28 PM 1:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P94000022272 (6)**

1. Corporation Name
AFFORDABLE STURDY HOMES, INC.

Principal Place of Business	Mailing Address
4513 HOPKINS AVE. TITUSVILLE FL 32780	4513 HOPKINS AVE. TITUSVILLE FL 32780

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/18/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 490 S. SUNRISE DRIVE	26 490 S. SUNRISE DRIVE
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 TITUSVILLE, FL	City & State 28 TITUSVILLE, FL
Zip 24 32780 Country 25 U.S.A.	Zip 29 32780 Country 30 U.S.A.

4. FEI Number: 59-3223916 ☐ 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	10. Name and Address of New Registered Agent
GAYLE, ASTLEY 1551 GARDEN STREET TITUSVILLE FL 32796	81 Name: OKOYE, ELEAZER C. 82 Street Address (P.O. Box Number is Not Acceptable): 490 S. SUNRISE DRIVE 83 84 City: TITUSVILLE FL 85 Zip Code: 32780

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: Eleazer (ELEAZER C. OKOYE) - REGISTERED AGENT (NEW) 07-24-95
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 '95		
TITLE	DP	11 TITLE	DP	☒ Change ☐ Addition
NAME	GAYLE, ASTLEY	12 NAME	OKOYE, ELEAZER C.	
STREET ADDRESS	4513 HOPKINS AVE.	13 STREET ADDRESS	490 S. SUNRISE DRIVE	
CITY-ST-ZIP	TITUSVILLE FL 32780	14 CITY-ST-ZIP	TITUSVILLE, FL. 32780	
TITLE	DS	21 TITLE	DS	☐ Change ☒ Addition
NAME	OKOYE, ELEAZER	22 NAME	OKOYE, MARJORY A.	
STREET ADDRESS	975 NOVA TERRACE	23 STREET ADDRESS	490 S. SUNRISE DRIVE	
CITY-ST-ZIP	TITUSVILLE FL 32796	24 CITY-ST-ZIP	TITUSVILLE, FL. 32780	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

CR2E034 (3/95)

14. I the 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 on an attachment with an address.

SIGNATURE: Eleazer (ELEAZER C. OKOYE) JUNE 30, 1995 (407) 383-3134
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0010000 CP