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PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP

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FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000016256 (6)

HOFNER ENTERPRISES, INC.

Principal Place of Business Mading Address 5707 - 45TH STREET EAST. #93 4452 BEE RIDGE RD BRADENTON FL 34203-5536 SARASOTA FL 34233 US 3a. Date of Last Report 3. Date Incorporated or Qualified 04/30/1996 02/27/1995 4. FEI Number 2. Principal Flace of Business 2a. Mailing Address Applied For 65-0563551 Not Applicable 26 \$8.75 Additional Suite. Apt. #. etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Country $Z_{\rm IP}$ Yes □ No Florida Statutes 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HOFNER, JOHN R 5707 - 45TH STREET EAST, #93 82 Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34203** 63 84 City Zip Code 85 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 Fiorida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent are familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE Signature, typed or ponted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. OFFICERS AND DIRECTORS 13. ☐ Change Addition DELETE TITLE 1.1 TITLE **E034** HOFNER, JOHN R 1.2 NAME NAME 5707 - 45TH STREET EAST, #93 1.3 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34203** CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE Change TITLE 21 TITLE HOFNER, RUTH E NAME 2.2 NAME 5707 - 45TH STREET EAST, #93 STREET ADDRESS 2.3 STREET ADORESS **BRADENTON FL 34203** CITY - S1 - 7/F 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE HOFNER, JOHN G NAME 3.2 NAME 5707 - 45TH STREET EAST, #93 STREET ADDRESS 3.3 STREET ADDRESS **BRADENTON FL 34203** DITY - ST - ZIP 3.4. CITY - ST - ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST-ZIP DELETE 6.1 TITLE ☐ Change ___ Addition TITLE 6 2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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14. I do hereby certify that the information supplied with this filling 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 supplimental 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

Solum R. Hoful.