

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000089646 (8)

1. Corporation Name
HONEY BEE RANCH, INC.

Principal Place of Business
116 E CONNECTICUT AVE
EDGEWATER FL 32132-2350

Mailing Address
116 E CONNECTICUT AVE
EDGEWATER FL 32132-2350

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

26. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

10/16/1997

4. FEI Number

59-3483707

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

ENGEL, THOMAS D
116 E CONNECTICUT AVE
EDGEWATER FL 32132-2350

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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Thomas D. Engel
Signature, typed or printed name of registered agent and title, if applicable

THOMAS D. ENGEL

(NOTE: Registered Agent signature required when reinstating)

DATE

3-11-98

12. OFFICERS AND DIRECTORS

TITLE PVST
NAME ENGEL, THOMAS D
STREET ADDRESS 116 E CONNECTICUT AVE
CITY-ST-ZIP EDGEWATER FL 32132-2350 ☐ DELETE

TITLE D
NAME ENGEL, THOMAS D
STREET ADDRESS 116 E CONNECTICUT AVE
CITY-ST-ZIP EDGEWATER FL 32132-2350 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE V.P.
12 NAME DANIEL GOODMAN ENGEL ☒ Change ☒ Addition
13 STREET ADDRESS 116 E. CONNECTICUT AVE.
14 CITY-ST-ZIP EDGEWATER, FLA. 32132-2350

21 TITLE CHARNE KLOTZ ☐ Change ☒ Addition
22 NAME
23 STREET ADDRESS 114 N. RIVERSIDE DRIVE
24 CITY-ST-ZIP EDGEWATER, FL. 32132
SECY/TREASURER

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP ☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP ☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP ☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing 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:

Thomas D. Engel

THOMAS D. ENGEL

3-11-98

CR2034 (10/97)