2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000103660

Entity Name: MONEY BEE MORTGAGE, INC.

FILED Oct 11, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

2100 CONSTITUTION BLVD. STE. #149 2100 CONSTITUTION BLVD. SARASOTA, FL 34231

SUITE 149

SARASOTA, FL 34231

Current Mailing Address: New Mailing Address:

2100 CONSTITUTION BLVD. STE. #149 2100 CONSTITUTION BLVD. SARASOTA, FL 34231 SUITE # 149

SARASOTA, FL 34231

HONEYCOMB ENTERPRISES, INC.

FEI Number: 65-0882385 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POSEY, PATRICIA 2100 CONSTITUTION BLVD STE #149

2100 CONSTITUTION BLVD SARASOTA, FL 34231 SUITE # 149 SARASOTA, FL 34231 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: P.F. DENLINGER 10/11/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title: PRFS POSEY, PATRICIA POSEY, PATRICIA Name: Name:

2938 MAYFLOWER STREET 3819 COUNTRYSIDE LANE Address: Address: City-St-Zip: SARASOTA, FL 34231 City-St-Zip: SARASOTA, FL 34233

Title: () Delete Title: VΡ () Change (X) Addition Name: Name: POSEY, PATRICIA

3819 COUNTRYSIDE LANE Address: Address: SARASOTA, FL 34233 City-St-Zip: City-St-Zip:

Title: () Change (X) Addition Title: () Delete SEC

POSEY, PATRICIA Name: Name: 3819 COUNTRYSIDE LANE Address Address: City-St-Zip: City-St-Zip: SARASOTA, FL 34233

Title: () Delete Title: **TREA** () Change (X) Addition

POSEY, PATRICIA Name: Name: Address: Address: 3819 COUNTRYSIDE LANE City-St-Zip: City-St-Zip: SARASOTA, FL 34233

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA POSEY **PRES** 10/11/2005