

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

FILED  
Jan 21 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # F02972 (0)  
1. Corporation Name  
CONCH COIN COMPANY



Principal Place of Business: 108 FITZPATRICK ST, KEY WEST FL 33040, US  
Mailing Address: P O BOX 4075, KEYWEST FL 33041-4075, US

3. Date Incorporated or Qualified: 10/23/1980  
3a. Date of Last Report: 01/17/1996

2. Principal Place of Business

21 122 ANN ST

2b. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

23 KEY WEST FL

27 City & State

28 Zip

24 33040

29 Country

25 US

30 Country

4. FEI Number: 59-2035526  
Applied For: Not Applicable

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Election Campaign Financing:  \$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

ARMANTROUT, J R  
1503 DUNCAN STREET  
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name: DONNA KNULL  
82 Street Address (P.O. Box Number is Not Acceptable): 1503 DUNCAN ST.  
83  
84 City: KEY WEST FL 85 Zip Code: 33040

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, 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: Donna Knull, DONNA KNULL, 1/19/97, DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	ARMANTROUT, J R	
STREET ADDRESS	1503 DUNCAN ST.	
CITY - ST - ZIP	KEY WEST FL 33040	
TITLE	DST	<input type="checkbox"/> DELETE
NAME	KNULL, DONNA	
STREET ADDRESS	1503 DUNCAN ST.	
CITY - ST - ZIP	KEY WEST FL 33040	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do 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: Donna Knull, JAN. 13, 1997 (305) 296-5346, DATE

CR2E034 (9/96)