

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 03, 2001 8:00 am**  
**Secretary of State**

05-03-2001 90093 018 \*\*\*\*70.00

**DOCUMENT # N40918**

1. Entity Name

**ALLEN BROUSSARD CONSERVANCY, INC.**

Principal Place of Business :

Mailing Address

**502 E. NEW HAVEN AVENUE  
 MELBOURNE FL 32901**

**502 E. NEW HAVEN AVENUE  
 MELBOURNE FL 32901**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0233682**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JAMES H FALLACE  
 C/O FALLACE & ASSOCIATES, P.A.  
 1900 S. HICKORY STREET, STE. A  
 MELBOURNE FL 32901**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:  
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	DP BROUSSARD, WILLIAM J.	<input type="checkbox"/> Delete
STREET ADDRESS	3660 N. RIVERSIDE DR.	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE NAME	DV BROUSSARD, MARGARET R.	<input type="checkbox"/> Delete
STREET ADDRESS	3660 N. RIVERSIDE DR.	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE NAME	D ZORBIS, ANDREW	<input type="checkbox"/> Delete
STREET ADDRESS	502 E. NEW HAVEN AVE.	
CITY-ST-ZIP	MELBOURNE FL 32901	
TITLE NAME	DST MCGONAGILL, M. LYNN	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	5642 CREEKWOOD DR.	
CITY-ST-ZIP	SARASOTA FL	
TITLE NAME	D ALLEN, KENNETH	<input type="checkbox"/> Delete
STREET ADDRESS	145 ORLANDO BLVD.	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	DST ERHART, LAURA	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	50 BROUSSARD RD.	
CITY-ST-ZIP	ST. CLOUD, FL 34773	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	D PAYLOR, RALPH R.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	502 E. NEW HAVEN AVE.	
CITY-ST-ZIP	MELBOURNE FL 32901	

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William J. Broussard* President 4/30/01 321-727-2020  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)

Attachment

8310457

2001 UNIFORM BUSINESS REPORT (UBR) # 1140918  
ATTACHMENT  
ALLEN BROUSSARD CONSERVANCY, INC.

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

D ADDITION  
ERHART, JOHN  
50 BROUSSARD ROAD  
ST. CLOUD, FL 34773

D ADDITION  
DENNIS MODRAK  
40 S. PINEAPPLE AVE.  
SUITE 200  
SARASOTA, FL 34236

D ADDITION  
MICHAEL ARBOGAST  
108 W. NEW HAVEN AVENUE  
MELBOURNE, FL 32901