

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 31, 2001 8:00 am
Secretary of State

05-31-2001 90001 021 ***150.00

553330

DO NOT WRITE IN THIS SPACE

DOCUMENT # P98000003595		
1. Entity Name CONROY SMITH, INC.		
Principal Place of Business 4601 GULF SHORE BLVD. NO. #9 NAPLES, FL 34103		Mailing Address 4601 GULF SHORE BLVD., NO. #9 NAPLES, FL 34103
2. Principal Place of Business 4601 GULF SHORE BLVD., NO Suite, Apt. #, etc. #9		3. Mailing Address 4601 GULF SHORE BLVD., NO. Suite, Apt. #, etc. #9
City & State NAPLES, FL		City & State NAPLES, FL
Zip 34103	Country USA	Zip 34103

4. FEI Number 65-0805891	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**ROBERT BRINDLEY
4601 GULF SHORE BLVD., NO.
UNIT #9
NAPLES, FL 34103**

7. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria: on back) ☒	FILE NOW! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
---	---	--

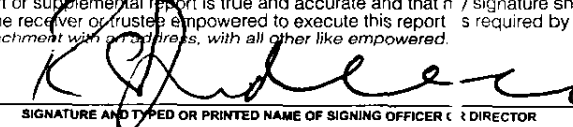
11. OFFICERS AND DIRECTORS

TITLE P	☐ Delete
NAME ROBERT BRINDLEY	
STREET ADDRESS 4601 GULF SHORE BLVD, NO, #9	
CITY-ST-ZIP NAPLES, FL 34103-2221	
TITLE S, T	☐ Delete
NAME JOSEPHINE BRINDLEY	
STREET ADDRESS 4601 GULF SHORE BLVD, NO, #9	
CITY-ST-ZIP NAPLES, FL 34103-2221	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 no officer or director of the corporation or the receiver or trustee empowered to execute this report has changed, or on an attachment with a new address, with all other like empowered.

SIGNATURE:  **4/27/01** **941 262 5188**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT BRINDLEY, PRESIDENT

CR2E034 (11/00)