

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

FILED

Feb 27 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 # **240613** (0)

1. Corporation Name
CONRAD YELVINGTON DISTRIBUTORS, INC.

Principal Place of Business
**800 BIG TREE ROAD
DAYTONA BEACH FL 32119-2602**

Mailing Address
**800 BIG TREE ROAD
DAYTONA BEACH FL 32119-2602**



3. Date Incorporated or Qualified **09/27/1960** 3a. Date of Last Report **04/17/1996**

4. FEI Number **59-0908399** 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**YELVINGTON, CONRAD
800 BIG TREE ROAD
DAYTONA BEACH FL 32019**

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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE

NAME **YELVINGTON, CONRAD**
STREET ADDRESS **800 BIG TREE ROAD**
CITY- ST- ZIP **SOUTH DAYTONA FL**

TITLE **VP** ☐ DELETE

NAME **YELVINGTON, MARGARET**
STREET ADDRESS **800 BIG TREE ROAD**
CITY- ST- ZIP **SOUTH DAYTONA FL**

TITLE **S** ☐ DELETE

NAME **YELVINGTON, DARLENE**
STREET ADDRESS **800 BIG TREE ROAD**
CITY- ST- ZIP **SOUTH DAYTONA FL**

TITLE **T** ☐ DELETE

NAME **YELVINGTON, SUSAN**
STREET ADDRESS **800 BIG TREE ROAD**
CITY- ST- ZIP **SOUTH DAYTONA FL**

TITLE **P** ☐ DELETE

NAME **GARY YELVINGTON**
STREET ADDRESS **800 BIG TREE RD.**
CITY- ST- ZIP **SOUTH DAYTONA FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 is dated 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:

Gary Yelvington

Gary Yelvington

2/19/97

(904) 767-5500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)