

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Gwentha H. Murrain
Secretary of State
TALLAHASSEE, FLORIDA 32304

APPROVED
SECRETARY OF STATE

95 MAY -1 11 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **248758** (5)

CONERLY BOOTERY, INC.

DO NOT WRITE IN THIS SPACE

Principal Office Location: QUINCY PLAZA S/C
13 E. JEFFERSON ST.
QUINCY FL 32351
US

Mailing Address: P O BOX 788
13 E. JEFFERSON ST.
QUINCY FL 32353-0788
US

3. Date Incorporated or Created 06/26/1961	3a. Date of Last Report 04/28/1994
4. FEI Number 59-0935104	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for the application fee under 5-129.005 Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Office Location	2a. Mailing Address
21. QUINCY PLAZA S/C State App # 1	26. P.O. BOX 788 State App # 08
22. City & State	27. City & State
23. QUINCY, FLORIDA	28. QUINCY, FLORIDA
24. 32353	25. GADSDEN
29. 30.	30.

9. Name and Address of Current Registered Agent

ALLEN, N E
41 N. VIRGINIA ST.
QUINCY FL 32351

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Accepted)	FL
83.	
84. City	

11. Pursuant to the provisions of Sections 600 and 602, Title 190, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office and registered agent 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 hereby sworn and accept the obligations of such as provided by Florida Statutes.

SIGNATURE: *N. E. Allen* (Signature) N. E. ALLEN (Typed Name) SECRETARY OF STATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES, TO OFFICERS AND DIRECTORS IN 12	
OFF	PD ALLEN, N E 41 N. VIRGINIA ST. QUINCY FL	1. OFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition
OFF	SDT ALLEN, MARY JANE 41 N. VIRGINIA ST. QUINCY FL	2. OFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition
OFF	VD ALLEN, MICHAEL E. 4962 GLEN CASTLE DR TALLAHASSEE FL	3. OFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition
OFF		4. OFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition
OFF		5. OFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition
OFF		6. OFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition
OFF		7. OFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition
OFF		8. OFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information contained 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. I am an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 100, Florida Statutes, and that my name appears on Block 12 of Block 13 if changed, or as an attachment with an address.

SIGNATURE: *N. E. Allen* N. E. ALLEN 4-28-95 904-875-9886
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR