CO	PROFIT RPORATION UAL REPORT 1996	FLORIDA DE Sand Sec	EPARTMENT OF STATE dra B Mortham sretary of State OF CORPORATIONS		
Corporation JACO	MENT # 389062 on Name B CONGER, INC.	2 (1) Mailing Address			
rt 30. 1860 Ft Myers	33 Evergreen Rd., S.E. Fl. 33912	RT 30. 19603 EVER FT MYERS FL 3391.		Date Incorporated or Qualified	3a. Date of Last Report
Drive and D	face of Business	·			3a. Date of Last Report 06/21/1995
сипараг Р	iace of business	2a. Mailing Address		4. FEI Number 59-1364796	Applied For
Suite, Apt.	#, etc.	Suite, Apt #, etc.			\$8.75 Additional
City & Stat	e	City & State		Election Campaign Financing Trust Fund Contribution	Fee Required \$5.00 May Be Added to Fees
Zip	Country 25	Ζιρ 29	Country 30	8. This corporation has liability for inta Florida Statutes	angible tax under s. 199.032.
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Reg	istered Agent
CONGE	R, JACOB				
RT. 30,	18603 EVERGREEN RD., S.E.		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
►I MYI					
((- MI)	ERS FL 33912		83		
((, MI)	ERS FL 33912		83 84 City		85 Zip Code
Pursuant	to the provisions of Sections 607.0509	and 607.1508, Florida Stat	84 City	ration sulvaits the statement for the owner.	FL 85 Zip Code
Pursuant or register familiar wi	to the provisions of Sections 607.0509	and 607.1508, Florida Stat a Such change was autho in 607.0505, Florida Statuk	84 City utes, the above named corp.	oration submits this statement for the purpor and of directors. I hereby accept the appoint	FL
Pursuant or register familiar wi	to the provisions of Sections 607,0502 and agent or both in the State of Florid	on 607.0505, Florida Statub	84 City utes, the above named corporation's bookers	ard or unectors, i filereby accept the appoint	FL se of changing its registered office ment as registered agent. I am
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I do 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)(k), Florida Statutes I further certify that the information indicated on this annual report or supplicamental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 or Block 14 or Block 15 or Block 16 or or an attachment with an address.

GNATURE:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR. SIGNATURE:

4-29-96 941-267-2275