

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 10 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 710402 (9)

1. Corporation Name

THE CONSERVANCY, INC.

Principal Place of Business

1450 MERRIHUE DR
NAPLES FL 34102
US

Mailing Address

1450 MERRIHUE DR
NAPLES FL 34102-3449
US3. Date Incorporated or Qualified
02/21/19663a. Date of Last Report
01/31/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip
34102

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

59-1157064

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes



No

9. Name and Address of Current Registered Agent

~~FITCH, JOHN H., PH.D.
645 PARKVIEW LANE
NAPLES FL 34102~~~~ROCK, DONALD J
154 AMBLEWOOD LANE
NAPLES FL 34102~~

10. Name and Address of New Registered Agent

81 Name

David E. Guggenheim

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

710 Starboard Drive

83

84 City

Naples,

FL

85 Zip Code

34103

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, to 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

David E. Guggenheim, President 1/6/97

12. OFFICERS AND DIRECTORS

TITLE	DT	<input type="checkbox"/> DELETE
NAME	RATLIFF, EUGENE	
STREET ADDRESS	777 GULF SHORE BLVD N	
CITY-ST-ZIP	NAPLES FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	GIFFORD, BEVERLY A	
STREET ADDRESS	7923 GRAND BAY DR	
CITY-ST-ZIP	NAPLES FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	FITCH, JOHN H., PH. D.	
STREET ADDRESS	645 PARKVIEW LANE	
CITY-ST-ZIP	NAPLES FL	
TITLE	DVC	<input type="checkbox"/> DELETE
NAME	SCHROEDER, PATRICIA H	
STREET ADDRESS	4001 GORDON DR	
CITY-ST-ZIP	NAPLES FL	
TITLE	C	<input type="checkbox"/> DELETE
NAME	HIGHMARK, DAVID A	
STREET ADDRESS	4001 N TAMiami TRAIL	
CITY-ST-ZIP	NAPLES FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	YORK, DONALD J	
STREET ADDRESS	154 AMBLEWOOD LANE	
CITY-ST-ZIP	NAPLES FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	P David E. Guggenheim
3.3 STREET ADDRESS	710 Starboard Drive
3.4 CITY-ST-ZIP	Naples, FL 34103
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	DVC
4.3 STREET ADDRESS	Ellin Goetz
4.4 CITY-ST-ZIP	399 Twelfth Ave. So. Naples, FL 34102
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 indicated 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David E. Guggenheim, President (941) 262-0304

Date

Daytime Phone # 0068404

CR2E037 (9/96)