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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000002472 (6)

CONDE	SCO CORPORATION	, ,			
Principal Plac	e of Business	Mailing Address		L MEDNIND THE MAKEN WHITH BOTH BOTH DOING WANT DOING WAS STREET TO BE	14    U    ( <b>14</b> )
22444 FOUNTAIN LAKES BLVD 22444 FOUNTAIN LAKES ESTERO FL 33928 ESTERO FL 33928			BLVD	DO NOT WRITE IN THIS SPACE	
				3. Date incorporated or Qualified	
				05/17/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Ap	plied For
21		26		NOT APPLICABLE No	t Applicabl
Suite, Apt.		Suite, Apt #, etc.		6. Certificate of Status Desired See Re	
City & State	е	City & State		6. Election Campaign Financing \$5.00	May Be
23		28		Trust Fund Contribution	o Fees
Z <sub>I</sub> p	Country	Zip	Country	8. This corporation owes or has paid the current year Int.	
24	[25]		30	The state of the s	] No
	9, Name and Address of Cu		B1 Name	10. Name and Address of New Registered Agent	
-96	CHIOGROSSP, JAMES J (	DCC HIOGROSSI			
224	144 FOUNTAIN LAKES BLVD			et Address (P.O. Box Number is Not Acceptable)	
ES1	TERO FL 33928				
			83		
			84 City	<b>▶ 85</b> Zip (	Code
44 5		0F00 4 007 4F00 51- 11-0		ed corporation submits this statement for the purpose of changing it orporation's board of directors. I hereby accept the appointment as	
SIGNATURE	Signature typed or printed name of registere	d agent and this if applicable (NOT)	Registered Agent signatu	ture required when re-natating) DATE	
12.		AND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	S IN 12
TITLE	PCD OCCHIOGROSSO, JAMES		1.1 TITLE	Li Change	
NAME STREET ADDRESS	22444 FOUNTAIN LAKES		1.2 NAME 1.3 STREET ADORESS	s	
CITY-ST-ZIP	ESTERO FL	,	1.4 CITY-ST-ZIP		
TITLE	SD	DELETE	2.1 TITLE	☐ Change	Additio
NAME	MCDONNELL, GERALDINE		2.2 NAME		
STREET ADDRESS	22444 FOUNTAIN LAKES	BLVD	2.3 STREET ADDRESS	s	
CITY-S1-Z#P	ESTERO-FL		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	☐ Change	Additio
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	5	
CITY-ST-ZIP			34. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	☐ Change	Addition
<b>₩</b> ME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	s	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	☐ Change	Addition
NAME			5.2 NAME	1	
STREET ADDRESS			5.3 STREET ADDRESS	s	
CITY-ST-ZWP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE	☐ Change	Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS	s	
CITY.ST. 7IP			64 City, ST-7IP	1	

14. 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 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 frustee 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:

Tones L. Cahinanso

4/22/98 498-1546

**FILED** 

May 01 1998 8:00am

Secretary of State