

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G35351

FILED  
Jan 03, 2012  
Secretary of State

**Entity Name:** CONRAD CONSULTING CORPORATION

**Current Principal Place of Business:**

212 PALMETTO ST  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 1359  
EDGEWATER, FL 32132

**New Mailing Address:**

**FEI Number:** 59-2326948

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CONRAD, LILLIAN  
212 PALMETTO ST.  
NEW SMYRNA BEACH, FL 32168 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: CONRAD, LILLIAN  
Address: P. O. BOX 1359  
City-St-Zip: EDGEWATER, FL 32132

Title: D  
Name: WHITE VICKI & DOUGLAS  
Address: 310 CONDUCT RD.  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D  
Name: REGAN, TERRI CONRAD  
Address: 35 GURLEY AV  
City-St-Zip: TROY, NY 12182

Title: D  
Name: RIDOLPH, CONNI CONRAD  
Address: LOCUST  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LILLIAN CONRAD

PRES

01/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date