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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name G67150

(4)

## **CONAX FLORIDA CORPORATION**

**FILED** Apr 25 1996 8:00 am Secretary of State



Principal Place of Business		Mailing Address	Mailing Address			ı derikli bond biniy debar ildən birili briy brakı bibli bibli biblir biblir biblir biblir biblir biblir				
% LAWRENCE R THOMAS 2801 75TH STREET NORTH ST. PETERSBURG FL 33710		% LAWRENCE R THOMAS 2801 75TH STREET NORTH ST. PETERSBURG FL 33710								
					3. Date Incorporated or Qualified 3a. Date of Last Report 04/25/1995					
	ace of Business	2a. Mailing Address				4. FEI Number		Ť	Applied For	
21		26				06-1090689			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	F-1 ' '			5. Certificate of Status Desired		\$8.	75 Additional	
		27	-   - <u></u>					F€	e Required	
City & State		City & State	F			6. Election Campaign Financing	☐ <b>\$5.00</b> May Be			
Zip	Country	<del></del>	28			Trust Fund Contribution			ded to Fees	
24	25	Zip 29	Country			8. This corporation has liability for		under	s 199.032,	
	25   29   30   9. Name and Address of Current Registered Agent		[30]	Florida Statutes Yes  10. Name and Address of New Regi						
				31	Name	10. Name and Address of New A	egistered A	gent		
HERZIG	STEPHEN A			_						
2801 75			82 Street Ad		Street Addre	ess (P.O. Box Number is Not Acceptab	le)			
	RSBURG FL 33710			13						
OTTELL	HODONG PE 337 IU		[*	٦						
			8	4	City			85	Zip Code	
11. Pursuant to	a the provisions of Sections 607,050	2 and 607 1508. Elorida Statut	oc the show		200000000000000000000000000000000000000	ation submits this statement for the pur	<u>FL</u>	ĻĻ		
Or registers	ed agont, or both, in the otalis of flori	iua, outin change was aumonz	ea av me ca	rpo	arned corpora pration's board	d of directors. I hereby accept the appo	oose of char vintment as r	iging it ealster	s registered office ed agent. I am	
Tex Times VVII	h, and accept the obligations of, Sec	tion 607.0505, Florida Statutes	S.							
SIGNATURE _	Signature, typed or printed name of registered agen	t and life if confinels (A.C.	arc. Burling and A		<del></del>					
12.		ID DIRECTORS	13.	gent	signature required	ADDITIONS/CHANGES TO OFFI	DATE	21050	TODO 11.10	
TIFLE	CCEO			1. 1 TITLE		ADDITIONS/CHANGES TO OFFI		Chang		
NAME	THOMAS, LAWRENCE R	<del></del>		1.2 NAME			_	Unany	e D Vogilion	
STREET ADDRESS	8473 BARDMOOR PLACE				ADDRESS					
CITY-ST-ZIP	LARGO FL	מס בו		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP						
TITLE	S	DELETE	2. 1 TITL		-ZIF			Chang	e 🔲 Addition	
NAME	LOSI, ROBERT		2.2 NAM				٤.	Chang	s [_] Addition	
STREET ADDRESS	2486 STAG RUN			2.3 STREET ADDRESS						
CiTY-ST-ZiP	CLEARWATER FL	·		24 CITY-ST-ZIP						
TITLE	V	□ DELETE	3 1 THTL		- ZIP			Change	n D Addition	
NAME	NAAB, CARLTON W.	- Section 3		3.2 NAME				cuang	e 🔲 Addition	
STREET ADDRESS	2126 FLAMINGO RD	100 ELAMINOO DO		3.3. STREET ADDRESS						
CITY-S1-ZIP	SAFETY HARBOR FL		3.4 CITY - S							
TITLE	V	☐ DELETE	4. 1 THILE		- Lif			Change	e 🗍 Addition	
NAME	WOJDAN, STANLEY J.	<del></del>		4.2 NAME				Sharige	, C Vandicion	
STREET ADDRESS	2444 DICUAN ANIAE			4.3 STREET ADDRESS						
CITY-ST-ZIP	SAFETY HARBOR FL		4.4 City-							
TITLE		DELETE	5 1 TITLE		e if			Change	Addition	
NAME		<b>1</b>		5.2 NAME				Sinarity	, CT VOUDOR	
STREET ADDRESS			5.3 STREE		nneess					
CHTY-ST-ZIP			1	5.4 CITY - ST-						
TITLE		DELETE	6. 1 TITLE		411			Change	Addition	
NAME		<b>_</b>	6.2 NAME				LJ	onange	LI AUGILION	
STREET ADDRESS			5.3 STREE		DDBESS					
CITY - ST - ZIP			64 CITY-		· ·					
	certify that the information supplied i	with this filing is voluntarily furni	ished and do	<u>ა I -</u> ӨЅ I	not qualify for	the exemption stated in Section 119.0	7/3i/k) Florid	a Stat	utes 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or by an attachment with an address.

SIGNATURE:

(813) 345-8000