

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H30076

Entity Name: CONARD'S INC.

FILED  
Feb 23, 2010  
Secretary of State

## Current Principal Place of Business:

2840 WEST BAY DRIVE  
# 249  
BELLEAIR BLUFFS, FL 33770 US

## New Principal Place of Business:

## Current Mailing Address:

240 SAND KEY ESTATES DR.  
#24  
CLEARWATER, FL 33767 US

## New Mailing Address:

FEI Number: 59-2496850      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARIANI, TIMOTHY K  
1550 HIGHLAND AVE. #B  
CLEARWATER, FL 33756 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD  
Name: AMANN, C BERT, JR  
Address: 240 SAND KEY ESTATES, DRIVE #24  
City-St-Zip: CLEARWATER BEACH, FL 33767 US

Title: VPSD  
Name: AMANN, CHARLES B III  
Address: 4161 BOLINGBROOK DR.  
City-St-Zip: MARIETTA, GA 30062 US

Title: ASD  
Name: RODEN, LOREN A  
Address: 6516 COFFEY ST  
City-St-Zip: CINCINNATI, OH 45230 US

Title: ASD  
Name: DREW, MARIE  
Address: 2014 CLERMONTVILLE-LAUREL RD.  
City-St-Zip: NEW RICHMOND, OH 45157 US

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: CB AMANN, JR

PTD

02/23/2010

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

\_\_\_\_\_  
Date