2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

FILED May 02, 2006 8:00 am Secretary of State

1. Entity Nam	MENT # N40918 ROUSSARD CONSERVAN			90429 019 ****	°70.00			
Principal Place of Business 502 E. NEW HAVEN AVENUE MELBOURNE, FL 32901 Mailing Address 502 E. NEW HAVEN AVENUE MELBOURNE, FL 32901 MELBOURNE, FL 32901			IUE		80332	11911 BIBIS BIBIS BIBIS BIBIS BI	(B) B)	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04062006 Cr	ng-NP	CR2E037 (11/05)		
City & State		City & State		4. FEI Number 65-023368	2	├	applied For lot Applicable	
Zip	Country	Zip	Country	5. Certificate of St	atus Desired	\$8.75 Ac	dditional	
	6. Name and Address of Current	Registered Agent		7. Name and Add	ress of New Re	gistered Agent		
IAMECIA			Name					
JAMES H FALLACE C/O FALLACE & ASSOCIATES, P.A. 1900 S. HICKORY STREET, STE. A			Street Addres	s (P.O. Box Number is 1	Not Acceptable)			
MELBOUF	RNE, FL 32901							
			City			FL Zip Co	de	
8. 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. I am lamiliar with, and accept the obligations of registered agent.								
SIGNATURE .								
SIGNATORIC.	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	legistered Agent eignature requ	aired when reinstating)		DATE		
Sidivatorie	Signature, typed or printed name of registered agent Filling Fee Is \$61.25 Due by May 1, 2006	and little if epplicable. (NOTE: R 9. Election Camp Trust Fund Coi	aign Financing	\$5.00 May Be Added to Fees		ke check payable la Department of S		
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	Filing Fee Is \$61.25 Due by May 1, 2006 OFFICERS AND DI	9. Election Camp Trust Fund Co	aign Financing ntribution.	\$5.00 May Be Added to Fees	Florid	ke check payable la Department of S	State	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

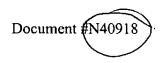
William J. BROUSSARD 4-26-66 321-726-44-69

ATTACHMENT 40080332

ATTACHMENT

ALLEN BROUSSARD CONSERVANCY, INC. 2006 Not-For-Profit Corporation ANNUAL REPORT

Orlando, FL 32837



☐ Change

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	C M. Dennis Modrak 2080 Ringling Blvd. Sarasota, FL 34237			C Modrak, M. Dennis 1903 Northgate Blvd. Sarasota, FL 34234
	D Huffman, H.A. 1430 Shellmound Rd. Enterprise, FL 32725			
	D Mindick, Robert 11013 Culpepper Court Orlando, FL 32836	☐ Delete		
	D Incandela, Rich 11199 Polo Club Road, Ste. A Wellington, FL 33414			
	D Macy, Tim O. 13336 Meergate Circle Suite B	□ Delete		