2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000004272

CONNER CAPITAL INVESTMENTS, INC.



Principal Place of Business

565 MATILDA PLACE LONGWOOD, FL 32750 Mailing Address

565 MATILDA PLACE LONGWOOD, FL 32750

FILED Apr 29, 2005 8:00 am Secretary of State

04-29-2005 90184 043 ***150.00

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

No Chg-P 03162005 CR2E034 (10/03)

4. FEI Number	 Applied For	
04-3743264	 Not Applicabl	
5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	•	

6. Name and Address of Current Registered Agent

CONNER, CHRISTOPHER **505 MATILDA PLACE** LONGWOOD, FL 32750

SIGNATURE: 4

DO NOT WRITE IN THIS SPACE

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 familiar with, and accept the obligations of registered agent.								
SIGNATURE								
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	CTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONNER, CHRISTOPHER C 505 MATILDA PL LONGWOOD, FL 32750							
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE			
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12. 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 report or supplemental teport is not and acquirate and that my enthanting the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or triffice empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment was an address—with all other like empowered.								