## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600006145 (2)

COLCON, INC. Mailing Address Principal Place of Business 1422 LOOKOUT TERRACE 2911 SOUTH HARBOR CITY BLVD. MELBOURNE FL 32901-7322 MELBOURNE FL 32901 3. Date Incorporated or Qualified 3a, Date of Last Report 01/17/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0720169 21 26 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Zin Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name HODGSON, STACEY A 1422 LOOKOUT TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) **MELBOURNE FL 32901** 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with and accept the obligations of, Section 607,0505, Florida Statutes. Stignature, typed or printed name of registered agent and title if applicable (NOTE: Repistered Apent signature required when re-instating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) DELETE Change Addition HILE 1.1 TITLE HODGSON, STACEY A 1.2 NAME CR2E034 1422 LOOKOUT TERRACE 1.3 STREET ADDRESS STREET ADDRESS **MELBOURNE FL 32901** 1.4 CITY-ST-ZIP CITY-ST-2IP TITLE DELETE 2.1 TITLE Change Addition OETKE, VICTOR H NAME 2.2 NAME 1422 LOOKOUT TERRACE STHEEL ADDRESS 23 STREET ADDRESS MELBOURNE FL 32901 CITY - ST - ZIP 2 4 CITY - ST-ZIP DELETE Change Addition 3.1 TITLE 7/11/5 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST 205 DELETE Change Addition 4.1 TITLE Tillf 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CHY-ST 78 DELETE Change Addition THEF 6.1 TITLE NAME 62 NAME STREET ADDRESS **6.3 STREET ADORESS** 

6.4 CITY-ST-ZIP

City - St - ZIP

14. I do hereby certify that the information supplied with this filing does not qual information indicated on this annual report or supplemental annual report of larn an officer or director of the corporation or the receiver or trustee employee.

for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the and accurate and that my signature shall have the same legal effect as if made under oath; that ed to except the this report as required by Chapter 607, Florida Statutes; and that my name

**FILED** 

Apr 17 1997 8:00am

Secretary of State