## 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 # P9600057767 (1)

ROBERT C. CONANT, INC.

1225	NW	22ND	AVENUE	
Princ	pal	Place	of Busine	SS

Mailing Address

## **FILED** May 05 1997 8:00am Secretary of State



1225 NW 22ND AVENUE DELRAY BEACH FL 33445		1225 NW 22ND AVENUE DELRAY BEACH FL 33445-2641					
				*	3. Date Incorporated or Qualified 07/08/1996	3a. Date of La	st Report
2. Principa'	Place of Business	2a. Mailing Address	······································		4. FEI Number		Applied For
21		26			65-0699974	<u> </u>	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<del></del> 1		5. Certificate of Status Desired Fee Regula		
City & Str	ato	City & State			6. Election Campaign Financing	<b>\$</b> 5.	00 May Be
23		28			Trust Fund Contribution		ied to Fees
Ζιp	Country	Zip	Count	'y	8. This corporation has liability for		er s. 199.032,
24	25	29	30			Yes 🔀 No	
	9. Name and Address of (	Current Registered Agent .			10. Name and Address of New Re	gistered Agent	· · · · · · · · · · · · · · · · · · ·
CC	)nant, robert c		8	1 Name			
1225 NW 22ND AVENUE DELRAY BEACH FL 33445			8	82 Street Address (P.O. Box Number is Not Acceptable)			
ÜL.	ENT DENOTTE COTTO		8	3		1	
			8			FL	Zip Code
11. Pursuan office or agent. I	it to the provisions of Sections 6 registered agent, or both, in the am familiar with, and accept the	07.0502 and 607.1508, Florida State State of Florida. Such change was obligations of, Section 607.0505,	utes, the abo s authorized I Florida Statut	ve-named cor by the corpora es.	rporation submits this statement for the pation's board of directors. I hereby acceptions	ourpose of changi ot the appointmen	ng its registered t as registered
SIGNATURE	Signature, typed or printed name of regis	And agent and trie if applicable. All	OIF Rooistered A	deol Signature regu	uired when reinstating)	DATE	
12.		RS AND DIRECTORS	13.	Bort o'grid.o'e rede	ADDITIONS/CHANGES TO OFFIC		TORS IN 12
TITLE	0	☐ DELETE	1.1 111.1			☐ Cha	
NAME	CONANT, ROBERT C	<del></del>	1.2 NAM				
STREET ADDRESS	JACK LINE AND ALICE LINEAU IN			ET ADDRESS			
CITY - ST - ZIP	DELRAY BEACH FL 3344		1.4 City				
TITLE		DELETE	2 1 TITUE			☐ Cha	nge 🔲 Addition
NAME			2.2 NAM	E	•		
STREET ACIDRESS			23 STRE	ET ADDRESS			
CITY-ST-ZIP				- ST-ZIP			
Tafikfi		DELETE	3.1 70%			Cha	nge Addition
NAME			3.2 NAM	E			
STREET ADDRESS	5		3.3 STRE	ET ADDRESS			
City St-ZIP				-ST-ZIP			
TITLE.		DELETE	4.1 TOU			☐ Cha	nge 🔲 Addition
NAME			4, 2 NAW	IE I			
STREET ADDRESS	ŝ		1	ET ADDRESS			
CITY - ST - ZIP			4.4 CITY				
TILLÉ		DELETE	5.1 TiTLE			☐ Cha	nge 🔲 Addition
NAME			5.2 NAM	E			
STREET ADDRESS	s			ET ADDRESS			
City+\$1+7iP			5.4 City				
THE		DELETE	61 TITL			☐ Cha	nge 🔲 Additior
NAMÉ			6.2 NAV	1			
STREET ADDRESS	s l		B C	ET ADDRESS			
CHY-\$1-ZIP			6.4 CITY	. 1			
. UH11-01-21F	1		■ U.4 VIII1	01.411			

14. He 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 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 on an attachment with an address.

SIGNATURE:



561-362-2722