2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000098788

8746 LEONA STREET

SEMINOLE, FL 33772

Address: City-St-Zip:

Entity Name: CONARD INVESTMENT HOLDINGS, INC.

FILED Apr 07, 2008 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
|---|--|----------|-----------------------|---|--------------------------------------|--|
| Current | micipai riace o | Dusiii | c33. | New Fillicipal Flace o | Dusilless. | |
| | DINGTON DRIVE ON BEACH, FL | | US | | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| | DINGTON DRIVE ON BEACH, FL | _ | US | | | |
| FEI Number | : 59-3554807 | FEI Numl | per Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | |
| 344 RUCK | K, KIMBERLEE A KLE DRIVE E, FL 32578 L | JS | | | | |
| | named entity su e of Florida. | bmits th | s statement for the p | ourpose of changing its registered | office or registered agent, or both, | |
| SIGNATU | RF. | | | | | |
| 0.0.0. | | Signatu | re of Registered Ag | ent | Date | |
| Election Car | mpaign Financing 1 | - | | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | D () D CONARD, ANN 15548 REDINGTO REDINGTON BEA | N DRIVE | 3708 | Title: (Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () D CONARD, SCOTT 15548 REDINGTO REDINGTON BEA | ON DRIVE | 3708 | Title: (Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | D () D JANSEN, COLETT | | | Title: (Name: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ANN L. CONARD D 04/07/2008