

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000060296

Entity Name: CONLON, INC.

**FILED**  
**Mar 10, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2280 SW 42ND TERRACE  
FORT LAUDERDALE, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ACCOUNTING & BUS. CONSULTANTS INC  
1535 SE 17TH STREET B206  
FT LAUDERDALE, FL 33316

**New Mailing Address:**

FEI Number: 65-0932600

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CONLON, BERNARD F  
2280 SW 42 TERRACE  
FT LAUDERDALE, FL 33317 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CONLON, BERNARD F  
Address: 2280 SW 42 TERRACE  
City-St-Zip: FT LAUDERDALE, FL 33317

Title: D  
Name: CONLON, JAMIE  
Address: 2280 SW 42ND TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33317

I hereby 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 all other like empowered.

SIGNATURE: BERNARD CONLON

D

03/10/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date