

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 09, 2001 8:00 am**  
**Secretary of State**

03-09-2001 90485 013 \*\*\*150.00

DOCUMENT # P99000105074

1. Entity Name

CONQUEST INVESTMENTS, INC.

Principal Place of Business

~~2113 OAKSTREAM AVENUE~~  
~~PENSACOLA FL 32526~~

Mailing Address

~~2113 OAKSTREAM AVENUE~~  
~~PENSACOLA FL 32526~~

2. Principal Place of Business

301 Godwin  
 Suite, Apt. #, etc.

3. Mailing Address

4911 Tangeen Street  
 Suite, Apt. #, etc.

City & State

Pensacola FL

City & State

Pensacola FL

4. FEI Number

59-3612135

Applied For

Not Applicable

Zip

Country

32504

Zip

Country

32526

5. Certificate of Status Desired

☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

~~PURSELL, LARRY W~~  
~~2113 OAKSTREAM AVENUE~~  
~~PENSACOLA FL 32526~~

7. Name and Address of New Registered Agent

Name

Wayne Briske

Street Address (P.O. Box Number is Not Acceptable)

4911 Tangeen Street

City

Pensacola

FL

Zip Code

32526

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.

SIGNATURE

Wayne Briske

35-01

(Signature, typed or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

\$5.00 May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	<del>P</del>	<input checked="" type="checkbox"/> Delete
NAME	<del>PURSELL, LARRY W</del>	
STREET ADDRESS	<del>2113 OAKSTREAM AVE</del>	
CITY-ST-ZIP	<del>PENSACOLA FL 32526</del>	
TITLE	<del>VP</del> President	<input type="checkbox"/> Delete
NAME	BRISKE, WAYNE R	
STREET ADDRESS	4911 TANGEN ST	
CITY-ST-ZIP	PENSACOLA FL 32526	
TITLE	T + VP	<input type="checkbox"/> Delete
NAME	RICH, MARTIN	
STREET ADDRESS	1212 JASPER ST	
CITY-ST-ZIP	CANTONMENT FL 32533	
TITLE	S	<input type="checkbox"/> Delete
NAME	JACKSON, RODNEY F	
STREET ADDRESS	6289 WINDWOOD DR	
CITY-ST-ZIP	PENSACOLA FL 32504	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Remove to longer in Corporation	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Wayne Briske

Date

3-5-01 850 484 3000

Daytime Phone #

CR2E034 (10/00)