

FILE NOW: FILING FEE AFTER MAY 1 IS \$350.00

FILED
Jun 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S94508 1. Corporation Name CONSERVATION CORPORATION OF FLORIDA			
Principal Place of Business 2909 BAY TO BAY BLVD. Suite 410 TAMPA FL. 33629		Mailing Address	
2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 2909 BAY TO BAY	26 Suite, Apt. #, etc.	11/15/91	2/5/1996
22 410	27 Suite, Apt. #, etc.	4. FEI Number	Applied For
23 TAMPA FL.	28 City & State	59-3111332	Not Applicable
24 33629	29 Zip	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25 USA	30 Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
Robert Guthy 3047 Wister Circle Valrico, FL 33594		☐ Yes ☐ No	
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.		10. Name and Address of New Registered Agent	
SIGNATURE Robert P. Guthy		81 Name	
(NOTE: Registered Agent signature required when reinstating)		82 Street Address (P.O. Box Number is Not Acceptable)	
12. OFFICERS AND DIRECTORS		83	
1. TITLE ☐ DELETE		84 City	
NAME Robert Guthy		85 Zip Code	
STREET ADDRESS 3047 WISTER CIR		FL	
CITY-ST-ZIP VALRICO FL 33594			
2. TITLE ☐ DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME John Guthy Sr.		1.1 TITLE ☐ Change ☐ Addition	
STREET ADDRESS 815 LILLIAN LN		1.2 NAME	
CITY-ST-ZIP SARASOTA FL 34243		1.3 STREET ADDRESS	
3. TITLE ☐ DELETE		1.4 CITY-ST-ZIP	
NAME		2.1 TITLE ☐ Change ☐ Addition	
STREET ADDRESS		2.2 NAME	
CITY-ST-ZIP		2.3 STREET ADDRESS	
4. TITLE ☐ DELETE		2.4 CITY-ST-ZIP	
NAME		3.1 TITLE ☐ Change ☐ Addition	
STREET ADDRESS		3.2 NAME	
CITY-ST-ZIP		3.3 STREET ADDRESS	
5. TITLE ☐ DELETE		3.4 CITY-ST-ZIP	
NAME		4.1 TITLE ☐ Change ☐ Addition	
STREET ADDRESS		4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	
6. TITLE ☐ DELETE		4.4 CITY-ST-ZIP	
NAME		5.1 TITLE ☐ Change ☐ Addition	
STREET ADDRESS		5.2 NAME	
CITY-ST-ZIP		5.3 STREET ADDRESS	
7. TITLE ☐ DELETE		5.4 CITY-ST-ZIP	
NAME		6.1 TITLE ☐ Change ☐ Addition	
STREET ADDRESS		6.2 NAME	
CITY-ST-ZIP		6.3 STREET ADDRESS	
8. TITLE ☐ DELETE		6.4 CITY-ST-ZIP	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
14. I do 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: Robert P. Guthy		5/19/97	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

CR2E034 (9/96)