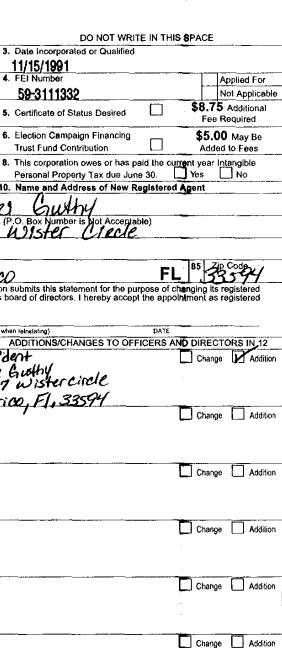
## **FILED** SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30. 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # S94508 (6)CONSERVATION CORPORATION OF FLORIDA Mailing Address Principal Place of Business 2909 BAY TO BAY BLVD. 2909 BAY TO BAY BLVD. **TAMPA FL 33629 TAMPA FL 33629** US US 3. Date Incorporated or Qualified 11/15/1991 2. Principal Place of Business SS€ 10 / 2a. Mailing Address 4. FEI Number 1209 W BRANDON BLUD 26 <del>59-311133</del>2 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired BRANDON 27 City & State 6. Election Campaign Financing 28 Trust Fund Contribution Country 335 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GUTHY, ROBERT 3047 WI**STE**R CIRCLE VALRICO FL 33594 84 City Valrico 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 lamitar with any acceptance of the appointment of the purpose of changing its registered agent. I am lamitar with any acceptance of the appointment as registered agent. I am lamitar with any acceptance of the appointment as registered agent. I am lamitar with a province of the appointment as registered agent. I am lamitar with a province of the appointment as registered agent. I am lamitar with a province of the appointment as registered agent. I am lamitar with a province of the appointment as registered agent. I am lamitar with a province of the appointment as registered agent. I am lamitar with a province of the appointment as registered agent. I am lamitar with a province of the appointment as registered agent. I am lamitar with a province of the appointment as registered agent. I am lamitar with a province of the appointment as registered agent. I am lamitar with a province of the appointment as registered agent. I am lamitar with a province of the appointment as registered agent. I am lamitar with a province of the appointment agent agent agent. I am lamitar with a province of the appointment agent agent agent agent agent. I am lamitar with a province of the appointment agent age SIGNATUR (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE President **GUTHY, ROBERT** Care Gully NAME 1.2 NAME 3047 Wistercircle 3047 WISTER CIR STREET ADDRESS 1.3 STREET ADDRESS VAURICO FL 33594 alrico, F1, 33594 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE TITLE **GUTHY, JOHN SR** NAME 2.2 NAME 815 LILLIAN LANE STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL 34243 CITY-ST-ZIP 24 CITY ST-ZIP

## Oct 14 1998 8:00am Secretary of State



CR2E034 (5/98)

CITY-ST-ZIP 14. 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 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, of on an attachment with an address.

3.1 TITLE

3.2 NAME

4.1 TITLE

4.2 NAME

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP 5.1 TITLE

5.4 CITY-ST-ZIP

63 STREET ADDRESS

3.4 CITY-ST-ZIP

SIGNATURE: X

TITLE

NAME

TITLE

STREET ADDRESS

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