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FILED
May 14 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 # **V39241** **(7)**

1. Corporation Name
CONSOLIDATED INVESTORS, INC.

Principal Place of Business	Mailing Address
13198 FOREST HILL BLVD. WEST PALM BEACH FL 33414	44-16TH STREET WHEELING WV 26003-3661

3. Date Incorporated or Qualified: 05/27/1992
3a. Date of Last Report: 04/23/1996

2. Principal Place of Business
21: 11809 Polo Club Road
22: Suite, Apt. #, etc.
23: City & State: West Palm Beach, FL
24: Zip: 33414
25: Country: US

2a. Mailing Address
26: 56290 Dills Bottom
27: Suite, Apt. #, etc.
28: City & State: Shadyside, OH
29: Zip: 43947
30: Country: US

4. FEI Number: 65-0441605 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MCLAUGHLIN, R.C.
13198 FOREST HILL BLVD.
WEST PALM BEACH FL 33414

10. Name and Address of New Registered Agent

81 Name: Allen Snow
82 Street Address (P.O. Box Number is Not Acceptable): 11809 Polo Club Road
83:
84 City: West Palm Beach **FL** 85 Zip Code: 33414

11. Pursuant to the provisions of Section 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE
Signature, typed or printed name of registered agent and title if applicable

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1.1 TITLE	DP	☒ Change ☐ Addition
NAME	STRAUB, GLENN F		1.2 NAME	STRAUB, GLENN F	
STREET ADDRESS	3290 ST. ANNE DRIVE		1.3 STREET ADDRESS	11809 Polo Club Road	
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP	West Palm Beach, FL 33414	
TITLE	T	☐ DELETE	2.1 TITLE	T	☒ Change ☐ Addition
NAME	SKINNER, HAROLD S		2.2 NAME	SKINNER, HAROLD S	
STREET ADDRESS	126 WESTGATE		2.3 STREET ADDRESS	11809 Polo Club Road	
CITY-ST-ZIP	WHEELING WV 26003		2.4 CITY-ST-ZIP	West Palm Beach, FL 33414	
TITLE	S	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	SAMOL, ROBERT J		3.2 NAME		
STREET ADDRESS	204 BETTY ST. - APT. A		3.3 STREET ADDRESS		
CITY-ST-ZIP	WHEELING WV 26003		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

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: [illegible] **DATE**