FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000014072 (8)

STEVE FRALEY, INC.

FILED
Apr 22 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address						- I TOBELIAND LIN INITE OLILI ODILI ADDILI DOLDI LIDILI DINI DELLE IDALI LIBI LOSI				
6308 WATCHARD TRACE DR P O BOX 13981					ľ					
Tallahasşéi		TALLAHASSEE FL 32317				200	NOT INCIDE IN T	an . ar		
U\$ /		US			2 Date	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
						/12/1996	Qualified			
2. Principal Pla	ace of Business	2a. Mailing Address				Vumber		1 14	pplied For	
21 426	E. 6th AvenE	26			I	9-3362714		- 1 -	ot Applicable	
Sulte, Apt.		Suite, Apt. #, etc.			T			··· ····	Additional	
22		27			5. Cert	ificate of Status [Desired	•	equired	
City & State		City & State			6. Elec	tion Campaign Fi	inancing	\$5.00	May Be	
23 Tallchasser, FL		28			I	t Fund Contributi			to Fees	
Zip	Country	Zip	Cour	ntry	8. This	corporation owe	s or has paid the	current year In	tangible	
24 3230	25 05	29	30		Pers	onal Property Ta	x due June 30.	Yes [□ No	
	9. Name and Address of Curren	t Registered Agent				ne and Address	of New Register	ed Agent		
	al e y, steve		1	81 Name	STEVE	Frales				
630	98 MALLARD TRACE DR	}	82 Street		ox Number is No	ot Acceptable)	·			
TAL	L a hassee FL 32312				`		• •			
			[83 42	7/2 F. (6th AVE assec				
			1	84 City	20 0. (oe Zin	Code _	
					TAllAh	950C	F		2303	
11. Pursuant to	o the provisions of Sections 607.0502	2 and 607.1508, Florida Statu	ites, the ab	ove-named	l corporation sub	omits this stateme	ant for the purpos	e of changing	its registered	
office or re	egistered agent, or both, in the State in familiar with, and accept the obligation	of Florida. Such change was ations of, Section 607,05 05 , F	autnorized Iorida Stati	i by the cor ites.	poration's board	of directors. I he	reby accept the	appointment as	s registered	
SIGNATURE	Stimburd		TEVE P		Presion	ENT 1	4/	1/98		
SIGNATURE S	Signature, typed or printed name of registered ager				e required when reinsta	ating)	DAT	E /		
12.	OFFICERS AND		13.				S TO OFFICERS		RS IN 12	
TITLE	P	DELETE	1.1 10	L E	PRESIDENT	· dans		Change Change	Addition	
NAME	FRALEY, STEVE		1.2 NA	V E	STEVE FOR	aley				
STREET ADDRESS	6308 MALLARD TRACE DR		1.3 \$11	ieet address	426 E. G	AN AND	_			
CITY-ST-ZIP	TALLAHASSEE FL		1.4 CH	Y-ST-ZIP	TAILANG	186CE FL	- 32303	<u> </u>		
TITLE		☐ DELETE 2.1		LE	ļ			Change	Addition	
NAME			2.2 NA	ME						
STREET ADDRESS			2.3 STI	REET ADDRESS	1					
CITY-ST-ZIP			2. 4 CI	Y-ST-ZIP						
TITLE		☐ DELETE	3.1 T(T	LE	}			☐ Change	☐ Addition	
NAME			3.2 NA	V E						
STREET ADDRESS			3.3 STI	REET ADDRESS						
CITY-ST-ZIP			3.4. CC	Y-ST-ZIP						
TITLE		☐ DELETE	4.1 TIT	LE	1			Change	Addition	
NAME			4. 2 NA	ME						
STREET ADDRESS			4.3 ST6	EET ADDRESS						
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP			- <u></u>			
TITLE		DELETE	51111	.E	,			Change	Addition	
NAME			5.2 NA	ME	Į.					
STREET ADDRESS			5.3 STF	EET ADDRESS	1					
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP						
TITLE	_	☐ DELETE	6.1 TIT	.E]			Change	Addition	
NAME			6.2 NAI	AE						
STREET ADDRESS			6.3 STF	EET ADDRESS]					
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP	<u> </u>			_		
14. I hereby co	ertify that the information supplied wit	th this filing does not qualify t	or the exe	nption state	ed in Section 119	9.07(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 effects at finade under cath; 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.

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