

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000006233

Entity Name: FRONTLINES INTERNATIONAL OPERATIONS, INC.

Current Principal Place of Business:

1922 DAIQUIRI LANE
LUTZ, FL 33549

Current Mailing Address:

18489 US HWY 41 N
BOX #2755
LUTZ, FL 33548 US

FEI Number: 84-2199609

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORMAN, CHRISTOPHER H
315 S. HYDE PARK AVE
TAMPA, FL 33606 US

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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SCHERER, BRIAN
Address 102 SILKWOOD DR.
City-State-Zip: JOHNSON CITY TN 37615

Title DIRECTOR
Name WILBOURNE, IVY
Address 16274 SHOAL CT.
City-State-Zip: BOKEELIA FL 33922

Title DIRECTOR
Name WHITE, KEN
Address 2427 AMHERST AVE
City-State-Zip: ORLANDO FL 32804

Title PRESIDENT
Name WHITE, CHARLES G
Address 476 MORMON CHURCH RD
City-State-Zip: BUCHANAN GA 30113

Title DIRECTOR
Name ROBINSON, LEONARD S.
Address 2613 SE 97TH SREET
City-State-Zip: MOORE OK 73160

Title DIRECTOR
Name SLAGLE, CLAYTON
Address 6390 FOX CREEK DR
City-State-Zip: CUMMING GA 30040-6695

Title TREASURER
Name SCHOEN, JUNINE
Address 5 MARSEILLE WAY
City-State-Zip: FOOTHILL RANCH CA 92610-1911

Title SECRETARY
Name MEID, CINDY
Address 24321 LANDING DR
City-State-Zip: LUTZ FL 33559

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES G WHITE

PRESIDENT

02/26/2024

Electronic Signature of Signing Officer/Director Detail

Date