


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2005 08:00 AM
Secretary of State

DOCUMENT # 296445 1. Entity Name FRANZE HOLDINGS, INC.		
Principal Place of Business P.O. BOX 622604 OVIEDO, FL 32762 US		Mailing Address P.O. BOX 622604 OVIEDO, FL 32762 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent FRANZE, FRANK 121 BLUE CREEK DRIVE WINTER SPRINGS, FL 32708		DO NOT WRITE IN THIS SPACE
11. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FRANZE, FRANK 121 BLUE CREEK DRIVE WINTER SPRINGS, FL 32708	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FRANZE, HELENE 121 BLUE CREEK DRIVE WINTER SPRINGS, FL 32708	
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>FRANK FRANZE</u> 4-10-05 407 977 7091 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		



01082005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1111325	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

U00000289985
04/06/05-80046-023 150.00

**DO NOT WRITE
IN THIS SPACE**