

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 373463

1. Entity Name
FREEBETH, INC.



Principal Place of Business
**2206 SW 22ND CIRCLE S.
OKEECHOBEE, FL 34974**

Mailing Address
**2206 SW 22ND CIRCLE S.
OKEECHOBEE, FL 34974**

DO NOT WRITE IN THIS SPACE

FILED
Aug 20, 2008 08:00 AM
Secretary of State



08182008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0284468

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**RENFRANZ, DONALD A
2206 SW 22ND CIRCLE S.
OKEECHOBEE, FL 34974**

**DO NOT WRITE
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U00000958046
08/20/08-80004-005 550.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
HALES, NORMAN F.
2357 SW 22ND CIR EAST
OKEECHOBEE, FL 34974**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
HALES, JOHN F.
1958 SW 28TH AVE
OKEECHOBEE, FL 34974**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
RENFRANZ, DONALD A.
2206 SW 22ND CIRCLE S.
OKEECHOBEE, FL 34974**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/18/08 863-634-4596
DONALD A. RENFRANZ