

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 19, 1999 8:00 am
Secretary of State

04-19-1999 90014 007 ***150.00

DOCUMENT # 416929

1. Corporation Name

FRENZ ENTERPRISES, INC.



Principal Place of Business

3326 BYRON RD.
GREEN COVE SPRINGS FL 32043

Mailing Address

PO BOX 905
MIDDLEBURG FL 32050-0905

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/15/1973

4. FEI Number

59-2800567

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 4159 County Road 218

Suite, Apt. #, etc.

22 Suite D

City & State

23 Middleburg, FL.

Zip

24 32068

25

USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

FRENZ, GEORGE L
4159 COUNTY ROAD 218
SUITE D
MIDDLEBURG FL 32068

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTS ☐ DELETE

NAME FRENZ, GEORGE L.

STREET ADDRESS 3326 BYRON ROAD

CITY-ST-ZIP GREEN COVE SPRINGS FL

TITLE D ☐ DELETE

NAME FRENZ, GEORGE L.

STREET ADDRESS 3326 BYRON ROAD

CITY-ST-ZIP GREEN COVE SPRINGS FL

TITLE V ☐ DELETE

NAME AMES WILLIAM H

STREET ADDRESS 3326 BYRON RD.

CITY-ST-ZIP GREEN COVE SPRINGS FL 32043

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PTS ☒ Change ☐ Addition

1.2 NAME FRENZ, GEORGE L.

1.3 STREET ADDRESS 4159 County Road Suite D

1.4 CITY-ST-ZIP Middleburg FL. 32068

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME Frenz, George L.

2.3 STREET ADDRESS 4159 County Road Suite D

2.4 CITY-ST-ZIP Middleburg, FL. 32068

3.1 TITLE V ☒ Change ☐ Addition

3.2 NAME AMES WILLIAM H.

3.3 STREET ADDRESS 4159 County Road Suite D

3.4 CITY-ST-ZIP Middleburg, FL. 32068

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: William H. Ames SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-99

Date

904 291-9839

Daytime Phone #