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

\* PROFIT CORPORATION **ANNUAL REPORT** 

1998



## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # 1. Corporation Name

439572

(9)

FROY, INC.

**FILED** 

May 01 1998 8:00am

Secretary of State

rnngipai riace di business Maning Address		Maiing Address		
14480 62ND ST N		P O BOX 6025		
CLEARWATER FL 34620		CLEARWATER FL 34618		DO NOT MIDITE IN THIS ODLOG
U\$		us		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
2 Principal F	Place of Business	2a. Mailing Address		11/08/1973 4. FEI Number   Language For
<b>—</b>		• • • • • • • • • • • • • • • • • • •		rpplied for
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-1494189 Not Applicable
22		· · ·		5. Certificate of Status Desired \$8.75 Additional
City & State		City & State		Fee Required
_ `		ê '		6. Election Campaign Financing \$5.00 May Be
Zip	Country	7 <sub>(p)</sub>	Country	Trust Fund Contribution Added to Fees
24 33760		<u> </u>	30	8. This corporation owes or has paid the current year Intangible
24) 00700	Name and Address of Cur		30	Personal Property Tax due June 30. X Yes J No 10. Name and Address of New Registered Agent
				10. Harrio and Address of Harr Hegisteled Agent
GRAS, JUDITH A.			81 Name	Karen S. McLead
14480 62ND ST. NORTH			82 Street	Address (P.O. Box Number is Not Acceptable) 14480 62nd Street North
CLEARWATER FL 34620			83	14480 62nd Street North
			63	
			84 City	85 Zip Code
				Clearwater FL   133760
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 arient, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I bereby account the appointment of 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 appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with a composition of the corporation of the corporatio				
SIGNATURE KAREN S. MCLEAD USE 22, 1998				
Streating, typed or prestrict name of registered agreed and title if applicable. (NOTE: Registered Agent signature required when roinstating) DATE				
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D THOMAS EDES A	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	THOMAS, FRED A.		1.2 NAME	
STREET ADDRESS	14480 62ND ST., NO.		1.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL	Whenever	1.4 CITY - ST - ZIP	
TITLE	8	X DELETE	2.1 TITLE	Change Addition
NAME	GRAS, JUDITH A.		2.2 NAME	
STREET ADDRESS	14480 62ND ST., NO.		2.3 STREET ADDRESS	
CITY-ST-ZIP	<u>Clearwater</u> fl		2. 4 CITY-ST-ZIP	
TITLE	P	DELETE	3.1 TITLE	Change [_] Addition
NAME	THOMAS, JOHN		3.2 NAME	
STREET ADDRESS	14480 62ND ST N		3.3 STREET ADDRESS	
CITY-ST-ZIP	<u>CLEARWATER FL</u>		3.4. CITY-ST-ZIP	
TITLE	<u>T</u>	☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME	EISCH, JAMES P		4. 2 NAME	
STREET ADDRESS	14480 62ND ST N		4.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL		4.4 CITY-ST-ZIP	
TITLE .		☐ DELET <b>E</b>	5.1 TITLE	S Change X Addition
NAME			5.2 NAME	Karen S. McLead
STREET ADDRESS			5.3 STREET ADDRESS	14480 62nd Street North
CITY-ST-ZIP			5.4 CITY - ST - ZIP	Clearwater, FL 33760
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY+ST-ZIP			6.4 CITY-ST-ZIP	
	<del></del>			

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 received 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 articular with an address.